

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Team Ryan

ADDRESS (number and street) 320 1st St SE
Washington DC 20003
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00545947 3. IS THIS REPORT NEW (N) OR AMENDED (A) AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 / 01 / 2017 through 06 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Kilgore, Paul, , ,

Signature of Treasurer Kilgore, Paul, , , [Electronically Filed] Date 10 / 02 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Team Ryan

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value="701099.98"/>	<input type="text" value="701099.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4104641.30"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10582783.01"/>	<input type="text" value="33069414.75"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="14687424.31"/>	<input type="text" value="33770514.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12135013.45"/>	<input type="text" value="30995430.08"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2552410.86"/>	<input type="text" value="2775084.65"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Team Ryan

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9086950.96	29221789.90
(ii) Unitemized	230410.83	392965.78
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9317361.79	29614755.68
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1209650.00	3299750.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10527011.79	32914505.68
12. Transfers From Affiliated/Other Party Committees.....	55771.22	87481.45
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	67427.62
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	10582783.01	33069414.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10582783.01	33069414.75

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2260394.73	4679028.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2260394.73	4679028.03
22. Transfers to Affiliated/Other Party Committees.....	9684057.72	26109071.05
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	186811.00	203581.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	- 2500.00	- 2500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	184311.00	201081.00
29. Other Disbursements (Including Non-Federal Donations).....	6250.00	6250.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12135013.45	30995430.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12135013.45	30995430.08

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10527011.79	32914505.68
34. Total Contribution Refunds (from Line 28(d))	184311.00	201081.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10342700.79	32713424.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2260394.73	4679028.03
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	67427.62
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2260394.73	4611600.41

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

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

FOR LINE NUMBER: PAGE 6 OF 1054
(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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ADAMS, JAMES, H., ,

Mailing Address **PO BOX 887**

City **TEMPLE** State **TX** Zip Code **76503-0887**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **FORD AUTOMOTIVE** Occupation (for Individual) **AUTOMOBILE DEALER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
05 / 24 / 2017
Transaction ID : SA11A.506094

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ADAMS, MICHAEL, , MR.,

Mailing Address **2735 NEEDMORE RD**

City **DAYTON** State **OH** Zip Code **45414-4207**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **ADAMS ROBINSON ENTERTAINMENT** Occupation (for Individual) **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 08 / 2017
Transaction ID : SA11A.504323

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ADELSON, MIRIAM, , DR.,

Mailing Address **3355 LAS VEGAS BOULEVARD, SOUTH**

City **LAS VEGAS** State **NV** Zip Code **89109-8941**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **ADELSON DRUG CLINIC** Occupation (for Individual) **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
33900.00

Date of Receipt
06 / 12 / 2017
Transaction ID : SA11A.509437

Amount of Each Receipt this Period
33900.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **41400.00**

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

**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 7 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADELSON, SHELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3355 LAS VEGAS BOULEVARD, SOUTH
 City LAS VEGAS State NV Zip Code 89109-8941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VENETIAN HOTEL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 33900.00

Date of Receipt 06 / 12 / 2017
Transaction ID : SA11A.509436
 Amount of Each Receipt this Period 33900.00
 Memo Item
 CONTRIBUTION

B. ADHAMI, FARRUKH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15235 HERON LAKE CROSSING
 City FT. WAYNE State IN Zip Code 46814-7583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506605
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. ADKISSON, STACIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5001 GREEN TREE BLVD
 City MIDLAND State TX Zip Code 79707-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDLAND ISD Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507908
 Amount of Each Receipt this Period 5400.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	39550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AGUILAR, ISABEL, , ,

Mailing Address 1665 HAWTHORND RD.

City SALEM	State IL	Zip Code 62881-1037
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2017

Transaction ID : SA11A.504117

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. AGUILAR, ISABEL, , ,

Mailing Address 1665 HAWTHORND RD.

City SALEM	State IL	Zip Code 62881-1037
---------------	-------------	------------------------

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2017

Transaction ID : SA11A.507514

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AGUILAR, ISABEL, , ,

Mailing Address 1665 HAWTHORND RD.

City SALEM	State IL	Zip Code 62881-1037
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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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.513300

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**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 9 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AHMAD, MUHAMMOD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14824 REMINGTON PL
 City FT. WAYNE State IN Zip Code 46814-7597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 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
 05 / 26 / 2017
Transaction ID : SA11A.506602
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. AHOLA, ARI, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3066 BIRD LANE
 City WINDERMERE State FL Zip Code 34786-8349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BIOZONE SCIENTIFIC INTERNATIONAL, Occupation (for Individual) CEO
 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
 04 / 17 / 2017
Transaction ID : SA11A.502337
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. AHOLA, ARI, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3066 BIRD LANE
 City WINDERMERE State FL Zip Code 34786-8349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BIOZONE SCIENTIFIC INTERNATIONAL, Occupation (for Individual) CEO
 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
 05 / 17 / 2017
Transaction ID : SA11A.505841
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**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 10 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AHOLA, ARI, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3066 BIRD LANE

City WINDERMERE	State FL	Zip Code 34786-8349
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BIOZONE SCIENTIFIC INTERNATIONAL,	Occupation (for Individual) CEO
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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
 06 / 17 / 2017

Transaction ID : SA11A.511790

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. AKBAR, TARIQ, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4431 FOLKSTONE DR

City FT. WAYNE	State IN	Zip Code 46814-9783
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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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
 05 / 26 / 2017

Transaction ID : SA11A.506604

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. ALBERT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2121 OLEANDER CT

City AURORA	State IL	Zip Code 60502-6788
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ECOMMERCE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2017

Transaction ID : SA11A.502390

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. ALBERT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2121 OLEANDER CT

City AURORA	State IL	Zip Code 60502-6788
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ECOMMERCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : SA11A.505589

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ALBERT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2121 OLEANDER CT

City AURORA	State IL	Zip Code 60502-6788
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ECOMMERCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2017

Transaction ID : SA11A.511155

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ALBRECHT, CAROL, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 WYCKOFF WAY

City CHESTER	State NJ	Zip Code 07930-2477
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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 M	/	D D D	/	Y Y Y Y Y Y
06		27		2017

Transaction ID : SA11A.512502

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**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 12 OF 1054
	<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)
Team Ryan

A. ALDERSON, EDWIN, B., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 202 W 19TH STREET

City EL DORADO	State AR	Zip Code 71730-3115
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALDERSON CAPITAL MANAGEMENT	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504659

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

B. ALLEN, DARRELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6334 LESOURDSVILLE W. CHESTER RD.

City HAMILTON	State OH	Zip Code 45011-8416
------------------	-------------	------------------------

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 ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11A.501109

Amount of Each Receipt this Period
105.00

Memo Item
CONTRIBUTION

C. ALLEN, DARRELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6334 LESOURDSVILLE W. CHESTER RD.

City HAMILTON	State OH	Zip Code 45011-8416
------------------	-------------	------------------------

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 ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2017

Transaction ID : SA11A.504468

Amount of Each Receipt this Period
105.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3210.00
TOTAL This Period (last page this line number only).....	

**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 13 OF 1054
	<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	<input type="checkbox"/> 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)
Team Ryan

A. ALLEN, DARRELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6334 LESOURDSVILLE W. CHESTER RD.
City HAMILTON State OH Zip Code 45011-8416
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 ▼ 630.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11A.508750
Amount of Each Receipt this Period 105.00
 Memo Item CONTRIBUTION

B. ALLISON, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1707 W. 12OTH. CT
City TULSA State OK Zip Code 74037-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 27 / 2017
Transaction ID : SA11A.503539
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ALLISON, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1707 W. 12OTH. CT
City TULSA State OK Zip Code 74037-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507839
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
TOTAL This Period (last page this line number only)..... ▶

**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 14 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLISON, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1707 W. 12OTH. CT
City TULSA State OK Zip Code 74037-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512864
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANDERSON, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 521 KEYSTONE AVE.
City RIVER FOREST State IL Zip Code 60305-1611
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BARACK FERRAZZANO Occupation (for Individual) ATTORNEY
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501354
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ANDERSON, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 521 KEYSTONE AVE.
City RIVER FOREST State IL Zip Code 60305-1611
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BARACK FERRAZZANO Occupation (for Individual) ATTORNEY
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11A.505349
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
TO BE CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**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 15 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 521 KEYSTONE AVE.

City RIVER FOREST	State IL	Zip Code 60305-1611
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BARACK FERRAZZANO	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2017

Transaction ID : SA11A.510075

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

TO BE CHARGED BACK

B. ANDERSON, EDWIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6337 GLEN HOLLOW DR.

City LIBERTY TWP	State OH	Zip Code 45011-0442
---------------------	-------------	------------------------

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 ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2017

Transaction ID : SA11A.502580

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ANDERSON, EDWIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6337 GLEN HOLLOW DR.

City LIBERTY TWP	State OH	Zip Code 45011-0442
---------------------	-------------	------------------------

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 ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : SA11A.506444

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6337 GLEN HOLLOW DR.
 City LIBERTY TWP State OH Zip Code 45011-0442
 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 ▼ 385.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511619
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ANDERSON, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6337 GLEN HOLLOW DR.
 City LIBERTY TWP State OH Zip Code 45011-0442
 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 ▼ 385.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.514042
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ANDERSON, PHILMORE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2354 N FILLMORE ST
 City ARLINGTON State VA Zip Code 22207-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAVIGATORS GLOBAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.500872
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2550.00
TOTAL This Period (last page this line number only)..... ▶

**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 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDREWS, BARRY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 IRVING BOULEVARD
 City DALLAS State TX Zip Code 75207-2308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS DISTRIBUTING Occupation (for Individual) FOUNDER & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512948
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. ANDRESEN, RANDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 N. PARKSIDE DR. 2
 City PARK RIDGE State IL Zip Code 60068-1001
 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 ▼ 330.00

Date of Receipt 04 / 14 / 2017
Transaction ID : SA11A.501923
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. ANDRESEN, RANDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 N. PARKSIDE DR. 2
 City PARK RIDGE State IL Zip Code 60068-1001
 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 ▼ 330.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502858
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5055.00
TOTAL This Period (last page this line number only)..... ▶

**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 18 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDRESEN, RANDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 N. PARKSIDE DR.
 2
 City PARK RIDGE State IL Zip Code 60068-1001
 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 ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2017
Transaction ID : SA11A.505730
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. ANDRESEN, RANDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 N. PARKSIDE DR.
 2
 City PARK RIDGE State IL Zip Code 60068-1001
 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 ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2017
Transaction ID : SA11A.506312
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ANDRESEN, RANDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 N. PARKSIDE DR.
 2
 City PARK RIDGE State IL Zip Code 60068-1001
 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 ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2017
Transaction ID : SA11A.510599
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**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 19 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDRESEN, RANDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2037 N. PARKSIDE DR.
 2
 City PARK RIDGE State IL Zip Code 60068-1001
 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 ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : SA11A.512222
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ANDREWS, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 MORAN
 City FRANKLIN State TN Zip Code 37069-6301
 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 ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11A.500679
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ANDREWS, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 MORAN
 City FRANKLIN State TN Zip Code 37069-6301
 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 ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2017
Transaction ID : SA11A.501313
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**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 20 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDREWS, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 MORAN
 City FRANKLIN State TN Zip Code 37069-6301
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503829
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. ANDREWS, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 MORAN
 City FRANKLIN State TN Zip Code 37069-6301
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2017
Transaction ID : SA11A.505308
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. ANDREWS, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 MORAN
 City FRANKLIN State TN Zip Code 37069-6301
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11A.505796
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. ANDREWS, WILLIAM, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1409 MORAN

City FRANKLIN	State TN	Zip Code 37069-6301
------------------	-------------	------------------------

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 ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2017

Transaction ID : SA11A.509302

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ANDROS, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 3651

City CARMEL	State CA	Zip Code 93921-3651
----------------	-------------	------------------------

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 ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2017

Transaction ID : SA11A.503495

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ANDROS, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 3651

City CARMEL	State CA	Zip Code 93921-3651
----------------	-------------	------------------------

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 ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : SA11A.504026

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**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 22 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDROS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3651
 City CARMEL State CA Zip Code 93921-3651
 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 ▼ 1200.00

Date of Receipt
 05 / 27 / 2017
Transaction ID : SA11A.507812
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. ANDROS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3651
 City CARMEL State CA Zip Code 93921-3651
 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 ▼ 1200.00

Date of Receipt
 05 / 31 / 2017
Transaction ID : SA11A.508674
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. ANDROS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3651
 City CARMEL State CA Zip Code 93921-3651
 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 ▼ 1200.00

Date of Receipt
 06 / 27 / 2017
Transaction ID : SA11A.512849
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 23 OF 1054
	<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	<input type="checkbox"/> 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)
Team Ryan

A. ANDROS, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 3651

City CARMEL	State CA	Zip Code 93921-3651
----------------	-------------	------------------------

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 ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

Transaction ID : SA11A.513706

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ANTHONY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 702 OBERLIN RD
STE 400

City RALEIGH	State NC	Zip Code 27605-1357
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANTHONY & CO.	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2017

Transaction ID : SA11A.504493

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. ANTHONY, JOHN, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 20129

City HOT SPRINGS	State AR	Zip Code 71903-0129
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANTHONY TIMBERLANDS, INC.	Occupation (for Individual) LBR MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2017

Transaction ID : SA11A.504685

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**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 24 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANTONUCCI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BEEKMAN HILL ROAD
 City ESSEX FELLS State NJ Zip Code 07021-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALL CITY LEASING Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503714
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANUNDTSEN, JOHN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 BENTLEY DRIVE
 City NAPLES State FL Zip Code 34110-8634
 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 ▼ 400.00

Date of Receipt 06 / 21 / 2017
Transaction ID : SA11A.511854
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. ARBOGAST, STEPHEN, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 LANCASTER DRIVE
 City CHAPEL HILL State NC Zip Code 27517-3429
 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 ▼ 250.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503661
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**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 25 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARGUINZONI, LYNN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ARD RD.
 City SEAGOVILLE State TX Zip Code 75159-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2017
Transaction ID : SA11A.504092
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. ARGUINZONI, LYNN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ARD RD.
 City SEAGOVILLE State TX Zip Code 75159-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2017
Transaction ID : SA11A.507519
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. ARGUINZONI, LYNN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ARD RD.
 City SEAGOVILLE State TX Zip Code 75159-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.513296
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 26 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARSENAULT, RICHARD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 13377

City ALEXANDRIA	State LA	Zip Code 71315-3377
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NEBLETT BEARD AND ARSENAULT	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
MM / DD / YYYY
06 / 16 / 2017
Transaction ID : SA11A.510640

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. ASHBY, ANDREW, STEVEN, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4102 KENWAY CT SE

City SMYRNA	State GA	Zip Code 30082-6415
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017
Transaction ID : SA11A.508946

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. ASHE, VICTOR, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3709 KINGSTON PIKE

City KNOXVILLE	State TN	Zip Code 37919-4605
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 800.00	

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017
Transaction ID : SA11A.509048

Amount of Each Receipt this Period
800.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. ASHFIELD, ROBERT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13166 KIMBERLEY LANE
 City HOUSTON State TX Zip Code 77079-6115
 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 ▼ 250.00

Date of Receipt **05 / 15 / 2017**
Transaction ID : SA11A.505178
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ASNESS, BRADLEY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 DEWART RD
 City GREENWICH State CT Zip Code 06830-3417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AQR CAPITAL MANAGEMENT Occupation (for Individual) CHIEF LEGAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44300.00

Date of Receipt **06 / 02 / 2017**
Transaction ID : SA11A.507935
 Amount of Each Receipt this Period 44300.00
 Memo Item CONTRIBUTION

C. ASNESS, CLIFF, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 THIRD AVE., 11TH FL.
 City NEW YORK State NY Zip Code 10017-2716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AQR CAPITAL MANAGEMENT Occupation (for Individual) MANAGING & FOUNDING PRINCIPAL,
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 146000.00

Date of Receipt **06 / 02 / 2017**
Transaction ID : SA11A.507898
 Amount of Each Receipt this Period 146000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	190550.00
TOTAL This Period (last page this line number only).....	

**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 28 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASNESS, LAUREL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 750 3RD AVENUE
FLOOR 11

City NEW YORK State NY Zip Code 10017-2716

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
146000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2017

Transaction ID : SA11A.507902

Amount of Each Receipt this Period
146000.00

Memo Item
CONTRIBUTION

B. ATKINS, THOMAS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 EDGECLIFF PL APT 1061

City CINCINNATI State OH Zip Code 45206-2898

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 ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017

Transaction ID : SA11A.504312

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. AUSEN, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1735 S ELLIS RD

City JANESVILLE State WI Zip Code 53548-9509

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DALMARAY CONCRETE PRODUCTS INC Occupation (for Individual) VICE PRESIDENT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2017

Transaction ID : SA11A.500642

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	171050.00
TOTAL This Period (last page this line number only).....	

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 29 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUSEN, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 S ELLIS RD
 City JANESVILLE State WI Zip Code 53548-9509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DALMARAY CONCRETE PRODUCTS INC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2017
Transaction ID : SA11A.504183
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. AUSEN, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 S ELLIS RD
 City JANESVILLE State WI Zip Code 53548-9509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DALMARAY CONCRETE PRODUCTS INC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2017
Transaction ID : SA11A.508374
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. AVERA, STEPHEN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7795 METCALF RD
 City THOMASVILLE State GA Zip Code 31792-8617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLOWERS FOODS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504775
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

**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 30 OF 1054
	<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)
Team Ryan

A. AVERY, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4650 N DITTMAR RD
 City ARLINGTON State VA Zip Code 22207-4352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SNAC INTL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511844
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. AVERY, RON, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9469 WATERFORD OAKS DRIVE
 City WINTER HAVEN State FL Zip Code 33884-2239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNACLE EXPRESS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511434
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. AXELBERG, MARY LOU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6125 TAMERLANE DRIVE
 City SOUTH BEND State IN Zip Code 46614-6374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505114
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00
TOTAL This Period (last page this line number only)..... ▶

**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 31 OF 1054
	<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)
Team Ryan

A. BABER, BRETT, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29 SILVER RIDGE RD

City BANGOR	State ME	Zip Code 04401-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LANHAM BLACKWELL & BABER	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2017

Transaction ID : SA11A.504245

Amount of Each Receipt this Period
3000.00

Memo Item CONTRIBUTION

B. BACHMAN, FERNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1660 N MAIN STREET

City WASHINGTON	State IL	Zip Code 61571-1389
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MESSAGE THERAPIST
--	--

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
05		22		2017

Transaction ID : SA11A.505997

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BAILEY, STEVE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 52206

City KNOXVILLE	State TN	Zip Code 37950-2206
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VOLUNTEER LUMBER SALES	Occupation (for Individual) FOUNDER
---	--

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
06		16		2017

Transaction ID : SA11A.510638

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	28250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. BAINUM, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5630 WISCONSIN AVENUE APT 501

City CHEVY CHASE	State MD	Zip Code 20815-4454
---------------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.506738

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. BAIRD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 N MAIN ST

City TEMPLE	State TX	Zip Code 76501-7629
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BAIRD, CREWS, SCHILLER AND WHITAKIR PC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504780

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. BAKER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 RIPLEY LANE

City OYSTER BAY	State NY	Zip Code 11771-4605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11A.500743

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 921 RIPLEY LANE

City OYSTER BAY	State NY	Zip Code 11771-4605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2017

Transaction ID : SA11A.503528

Amount of Each Receipt this Period
110.00

Memo Item CONTRIBUTION

B. BAKER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 921 RIPLEY LANE

City OYSTER BAY	State NY	Zip Code 11771-4605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2017

Transaction ID : SA11A.503870

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BAKER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 921 RIPLEY LANE

City OYSTER BAY	State NY	Zip Code 11771-4605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2017

Transaction ID : SA11A.507789

Amount of Each Receipt this Period
110.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 34 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALDAUF, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11750 SPENCER RD
 City SAGINAW State MI Zip Code 48609-9138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KERKAU Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.504013
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BALDWIN, RONAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2017 EAGLE AV
 City ALAMEDA State CA Zip Code 94501-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERENE THOSE LLC Occupation (for Individual) GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501718
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BALDWIN, RONAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2017 EAGLE AV
 City ALAMEDA State CA Zip Code 94501-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERENE THOSE LLC Occupation (for Individual) GENERAL COUNSEL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 13 / 2017
Transaction ID : SA11A.505762
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**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 35 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALDWIN, RONAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2017 EAGLE AV
 City ALAMEDA State CA Zip Code 94501-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERENE THOSE LLC Occupation (for Individual) GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 13 / 2017
Transaction ID : SA11A.510268
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BALLOUN, JAMES, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2540 WOODWARD WAY NW
 City ATLANTA State GA Zip Code 30305-3562
 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 ▼ 25000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504317
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. BARGER, JOHN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3210 GOLDSBORO ST
 City SAN ANTONIO State TX Zip Code 78230-4436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BROADCASTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508927
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. BARGE, VERNON, W., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 BIRDCREEK DR UNIT 211
 City TEMPLE State TX Zip Code 76502-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARGE PROPERTIES MANAGEMENT CO Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506609
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. BARKER, PETER, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 50410
 City MONTECITO State CA Zip Code 93150-0410
 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 ▼ 9999.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502965
 Amount of Each Receipt this Period 9999.00
 Memo Item CONTRIBUTION

C. BAROT, HEMANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6316 BATTLEGATE RD
 City JACKSONVILLE State FL Zip Code 32258-9425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMOOTHIE SHACK Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 07 / 2017
Transaction ID : SA11A.501262
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 12549.00
TOTAL This Period (last page this line number only).....▶

**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 37 OF 1054
	<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)
Team Ryan

A. BAROT, HEMANT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6316 BATTLEGATE RD

City JACKSONVILLE	State FL	Zip Code 32258-9425
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SMOOTHIE SHACK	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : SA11A.501595

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BAROT, HEMANT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6316 BATTLEGATE RD

City JACKSONVILLE	State FL	Zip Code 32258-9425
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SMOOTHIE SHACK	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.505403

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BAROT, HEMANT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6316 BATTLEGATE RD

City JACKSONVILLE	State FL	Zip Code 32258-9425
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SMOOTHIE SHACK	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2017

Transaction ID : SA11A.509995

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 38 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARRETO, HECTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31471 OLD SAN JUAN RD
 City SAN JUAN CAPISTRAN State CA Zip Code 92675-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARRETO ASSOCIATES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12300.00

Date of Receipt **04 / 06 / 2017**
Transaction ID : SA11A.500883
 Amount of Each Receipt this Period 12300.00
 Memo Item CONTRIBUTION

B. BARRETT, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 PINCKNEY LANDING DR.
 City SHELDON State SC Zip Code 29941-3051
 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 ▼ 1250.00

Date of Receipt **04 / 03 / 2017**
Transaction ID : SA11A.500476
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BARRICK, RICH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15907 BOOTH CIRCLE
 City VOLENTE State TX Zip Code 78641-9679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 13 / 2017**
Transaction ID : SA11A.501726
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13400.00
TOTAL This Period (last page this line number only).....	

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 39 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTLETT, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 US ROUTE 9
 City ELIZABETHTOWN State NY Zip Code 12932-1720
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503409
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BARTLETT, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 US ROUTE 9
 City ELIZABETHTOWN State NY Zip Code 12932-1720
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506855
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BARTLETT, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 US ROUTE 9
 City ELIZABETHTOWN State NY Zip Code 12932-1720
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512646
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. BASHA, YAHYA, MOSSA, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30701 WOODWARD AVE STE LL
 City ROYAL OAK State MI Zip Code 48073-0988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASHA DIAGNOSTICS PC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **06 / 02 / 2017**
Transaction ID : SA11A.508250
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. BASILE, ROBERT, J., MR., SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 WOODRIDGE COURT
 City LINO LAKES State MN Zip Code 55014-5442
 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 ▼ 610.00

Date of Receipt **05 / 17 / 2017**
Transaction ID : SA11A.505810
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BASILE, ROBERT, J., MR., SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 WOODRIDGE COURT
 City LINO LAKES State MN Zip Code 55014-5442
 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 ▼ 610.00

Date of Receipt **05 / 26 / 2017**
Transaction ID : SA11A.506773
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2650.00
TOTAL This Period (last page this line number only).....▶	

**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 41 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASILE, ROBERT, J., MR., SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 WOODRIDGE COURT

City LINO LAKES	State MN	Zip Code 55014-5442
--------------------	-------------	------------------------

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 ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2017

Transaction ID : SA11A.506775

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BASILE, ROBERT, J., MR., SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 WOODRIDGE COURT

City LINO LAKES	State MN	Zip Code 55014-5442
--------------------	-------------	------------------------

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 ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : SA11A.508496

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BASILE, ROBERT, J., MR., SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 WOODRIDGE COURT

City LINO LAKES	State MN	Zip Code 55014-5442
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : SA11A.508497

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**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 42 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASORE, JOE, NEFF, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 NOTTINGHAM CIR
 City BELLA VISTA State AR Zip Code 72715-8475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOPER COMMUNITIES INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503293
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 CONTRIBUTION

B. BATEMAN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 N 850 E
 City BOUNTIFUL State UT Zip Code 84010-2665
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503429
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BATEMAN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 N 850 E
 City BOUNTIFUL State UT Zip Code 84010-2665
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506878
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 43 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATEMAN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 N 850 E
 City BOUNTIFUL State UT Zip Code 84010-2665
 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 ▼ 300.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512639
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BATES, HUNTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 300
 City HARRODS CREEK State KY Zip Code 40027-0300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AKIN GUMP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513154
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BAUER, BRIAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12306 MCKAYS POINTE
 City FORT WAYNE State IN Zip Code 46814-9199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUTHERAN HOSPITAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504670
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6050.00
TOTAL This Period (last page this line number only)..... ▶

**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 44 OF 1054
	<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)
Team Ryan

A. BAUGHEN, RICHARD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5274 HWY 226

City JONESBORO	State AR	Zip Code 72404-1008
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSTRUCTION
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2017

Transaction ID : SA11A.504197

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. BAXTER, FRANK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11100 SANTA MONICA BLVD STE 1200

City LOS ANGELES	State CA	Zip Code 90025-3387
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JEFFERIES & COMPANY	Occupation (for Individual) FORMER CEO
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2017

Transaction ID : SA11A.504198

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. BEAN, JEROME, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3940 OAKLEAF DR.

City ZIONSVILLE	State IN	Zip Code 46077-9293
--------------------	-------------	------------------------

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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : SA11A.504000

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11750.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 45 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BECCHI, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 HIGHLAND AVENUE
 City SHORT HILLS State NJ Zip Code 07078-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATTON BOGGS LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.500866
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

B. BECKENDORF, J, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 IRONWOOD ROAD
 City SAN ANTONIO State TX Zip Code 78212-2541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINE CONSULTANTS, INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11A.508469
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. BECKENDORF, J, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 IRONWOOD ROAD
 City SAN ANTONIO State TX Zip Code 78212-2541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINE CONSULTANTS, INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513747
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 46 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEDESCHI, SILVIO, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3107 SUNSET BOULEVARD
 City STEUBENVILLE State OH Zip Code 43952-2335
 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 ▼ 1000.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511823
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BEDNARSKI, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 490 PALMDALE DR.
 City OLDSMAR State FL Zip Code 34677-2068
 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 ▼ 600.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503413
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BEDNARSKI, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 490 PALMDALE DR.
 City OLDSMAR State FL Zip Code 34677-2068
 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 ▼ 600.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506838
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 47 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. BEDNARSKI, IRENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 490 PALMDALE DR.
City OLDSMAR State FL Zip Code 34677-2068
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 ▼ 600.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512625
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5100 JOHN D RYAN BOULEVARD APT 522
City SAN ANTONIO State TX Zip Code 78245-3547
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 ▼ 595.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11A.502908
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5100 JOHN D RYAN BOULEVARD APT 522
City SAN ANTONIO State TX Zip Code 78245-3547
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 ▼ 595.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503348
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**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 48 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 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 ▼ 595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2017
Transaction ID : SA11A.503762
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 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 ▼ 595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2017
Transaction ID : SA11A.504518
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 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 ▼ 595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017
Transaction ID : SA11A.507319
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 49 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 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 ▼ 595.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507489
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 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 ▼ 595.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.508709
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 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 ▼ 595.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511257
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**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 50 OF 1054
	<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)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO	State TX	Zip Code 78245-3547
---------------------	-------------	------------------------

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 ▼
595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.513270

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BEHN, CONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38435 CR13

City ELIZABETH	State CO	Zip Code 80107-8902
-------------------	-------------	------------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2017

Transaction ID : SA11A.501348

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BEHN, CONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38435 CR13

City ELIZABETH	State CO	Zip Code 80107-8902
-------------------	-------------	------------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2017

Transaction ID : SA11A.506374

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**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 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEINHOWER, ELAINE, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 663 FISHING CREEK ROAD
 City NEW CUMBERLAND State PA Zip Code 17070-2748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EK SERVICE INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.505433
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BELDING, MAXWELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 BOKUM ROAD, APT 308
 City ESSEX State CT Zip Code 06426-1542
 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 ▼ 500.00

Date of Receipt 05 / 01 / 2017
Transaction ID : SA11A.503672
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 W LE MONT BOULEVARD
 City MEQUON State WI Zip Code 53092-5226
 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 ▼ 1000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504648
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELYAVSKI, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2626 EL CAMINO REAL
 City REDWOOD CITY State CA Zip Code 94061-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COAST LIGHTING Occupation (for Individual) BUYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501366
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BELYAVSKI, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2626 EL CAMINO REAL
 City REDWOOD CITY State CA Zip Code 94061-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COAST LIGHTING Occupation (for Individual) BUYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11A.505356
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BELYAVSKI, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2626 EL CAMINO REAL
 City REDWOOD CITY State CA Zip Code 94061-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COAST LIGHTING Occupation (for Individual) BUYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 10 / 2017
Transaction ID : SA11A.510082
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**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 53 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. BENNETT, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 TIMBERLAKE DR
 City LITTLE ROCK State AR Zip Code 72207-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.504710
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. BEOWNING, CHARLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18773 HWY 174
 City PELL CITY State AL Zip Code 35125-
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2017
Transaction ID : SA11A.501933
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BEOWNING, CHARLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18773 HWY 174
 City PELL CITY State AL Zip Code 35125-
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2017
Transaction ID : SA11A.505737
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BOWNING, CHARLIE, , ,

Mailing Address 18773 HWY 174

City PELL CITY	State AL	Zip Code 35125-
-------------------	-------------	--------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2017

Transaction ID : SA11A.510610

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BERGH, KJELL, , ,

Mailing Address 4950 NEAL AVENUE NORTH

City STILLWATER	State MN	Zip Code 55082-1071
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BORTON VOLVO INC.	Occupation (for Individual) BUSINESS MAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2017

Transaction ID : SA11A.500492

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BERNOT, MARIETTA, E., ,

Mailing Address 7615 WOODRIDGE CIRCLE

City ALEXANDRIA	State VA	Zip Code 22308-1060
--------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2017

Transaction ID : SA11A.502775

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 55 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERTELKAMP, SANDRA, FISER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2215 LAKE LANE
 City KNOXVILLE State TN Zip Code 37919-9143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507915
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. BERTHIAUME, DOUGLAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 BUTTONWOOD DR
 City ANDOVER State MA Zip Code 01810-5880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATERS CORPORATION Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502970
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. BERTUCCI, PAUL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 10140
 City GULFPORT State MS Zip Code 39505-0140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEB DISTRIBUTING Occupation (for Individual) BEER WHOLESALER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504808
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 32500.00
TOTAL This Period (last page this line number only)..... ▶

**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 56 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERTZ, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3432 VALLEY WOODS DR.
 City VERONA State WI Zip Code 53593-9748
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503498
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. BERTZ, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3432 VALLEY WOODS DR.
 City VERONA State WI Zip Code 53593-9748
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2017
Transaction ID : SA11A.507815
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. BERTZ, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3432 VALLEY WOODS DR.
 City VERONA State WI Zip Code 53593-9748
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512843
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BESENT, SCOTT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 MEADOWCROFT LN

City GREENWICH	State CT	Zip Code 06830-3823
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KEY SQUARE CAPITAL MANAGEMENT	Occupation (for Individual) FOUNDER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11A.504322

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. BEST, ERIC, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 STONEY LANE

City CROWNSVILLE	State MD	Zip Code 21032-1302
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOB HALL, LLC	Occupation (for Individual) GENERAL MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11A.506019

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. BETTRIDGE, FERN, P., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10322 CASE ROAD SW

City OLYMPIA	State WA	Zip Code 98512-1049
-----------------	-------------	------------------------

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 ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2017

Transaction ID : SA11A.501645

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30025.00
TOTAL This Period (last page this line number only).....	

**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 58 OF 1054
	<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)
Team Ryan

A. BEYER, ROBERT, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1888 CENTURY PARK E
SUITE 1550

City LOS ANGELES State CA Zip Code 90067-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHAPARAL INVESTMENTS Occupation (for Individual) CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
05 / 26 / 2017
Transaction ID : SA11A.506595

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

B. BIBLE, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 KATOM DRIVE

City KODAK State TN Zip Code 37764-1483

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KATOM RESTAURANT SUPPLY Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
05 / 30 / 2017
Transaction ID : SA11A.507246

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

C. BINDER, ADELE, H., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 SOUTH LAKE ST.
SUITE 300

City PASADENA State CA Zip Code 91101-3009

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 ▼
750.00

Date of Receipt
04 / 01 / 2017
Transaction ID : SA11A.500692

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 27750.00

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

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

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

FOR LINE NUMBER: PAGE 59 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BINDER, ADELE, H., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 SOUTH LAKE ST.
 SUITE 300
 City PASADENA State CA Zip Code 91101-3009
 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 ▼ 750.00

Date of Receipt 05 / 01 / 2017
Transaction ID : SA11A.503828
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BINDER, ADELE, H., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 SOUTH LAKE ST.
 SUITE 300
 City PASADENA State CA Zip Code 91101-3009
 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 ▼ 750.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11A.508095
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BLACKBURN, DAVID, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23451 OWL CREEK ROAD
 City GATESVILLE State TX Zip Code 76528-5125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPLE EDC Occupation (for Individual) ECONOMIC DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506064
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BLACKSHEAR, JOSEPH, , ,			Date of Receipt
Mailing Address 519 BAY POINT DR.			<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2017"/>
City GALLATIN	State TN	Zip Code 37066-4486	Transaction ID : SA11A.500644
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BLACKSHEAR, JOSEPH, , ,			Date of Receipt
Mailing Address 519 BAY POINT DR.			<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2017"/>
City GALLATIN	State TN	Zip Code 37066-4486	Transaction ID : SA11A.504179
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BLACKSHEAR, JOSEPH, , ,			Date of Receipt
Mailing Address 519 BAY POINT DR.			<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2017"/>
City GALLATIN	State TN	Zip Code 37066-4486	Transaction ID : SA11A.508371
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 61 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKBURN III, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 999
 City BROOKSHIRE State TX Zip Code 77423-0999
 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 ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503511
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BLACKBURN III, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 999
 City BROOKSHIRE State TX Zip Code 77423-0999
 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 ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2017
Transaction ID : SA11A.507793
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BLACKBURN III, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 999
 City BROOKSHIRE State TX Zip Code 77423-0999
 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 ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512832
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**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 62 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLALOCK, JAMES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1801 WINFIELD DUNN PARKWAY
 City SEVIERVILLE State TN Zip Code 37876-1509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508937
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. BLANK, RICHARD, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5618 EDGEWOOD RD
 City LITTLE ROCK State AR Zip Code 72207-5314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 STEPHENS INC INVESTMENT BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.504851
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BODE, JOHN, W., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 PENNSYLVANIA AVE NW STE 950
 City WASHINGTON State DC Zip Code 20006-5806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CORN REFINERS ASSOCIATION PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 16 / 2017
Transaction ID : SA11A.501749
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 63 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLING, HERMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4206 CENTRAL RIVER PARK
 City BERKELEY LAKE State GA Zip Code 30096-4030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ED VOYLES AUTOMOTIVE GROUP Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500730
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BOLING, HERMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4206 CENTRAL RIVER PARK
 City BERKELEY LAKE State GA Zip Code 30096-4030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ED VOYLES AUTOMOTIVE GROUP Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 05 / 01 / 2017
Transaction ID : SA11A.503849
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DRIVE
 City SAN DIEGO State CA Zip Code 92116-2005
 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 ▼ 600.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503430
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**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 64 OF 1054		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DRIVE
 City SAN DIEGO State CA Zip Code 92116-2005
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506881
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DRIVE
 City SAN DIEGO State CA Zip Code 92116-2005
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2017
Transaction ID : SA11A.509958
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DRIVE
 City SAN DIEGO State CA Zip Code 92116-2005
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512664
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 65 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. BOOTH, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10431 BELLAGIO RD
 City LOS ANGELES State CA Zip Code 90077-3818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OTIS BOOTH FOUNDATION Occupation (for Individual) INFORMATION REQUESTED PER BE
 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
 04 / 18 / 2017
Transaction ID : SA11A.502279
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

B. BORDEN, J., MICHAEL, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1297
 City JANESVILLE State WI Zip Code 53547-1297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUFCOR Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.510538
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. BORDERS, JAMES, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 817 W PEACHTREE ST STE 400
 City ATLANTA State GA Zip Code 30308-1144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOVARE GROUP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504805
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	32500.00
TOTAL This Period (last page this line number only).....	

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 66 OF 1054
	<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)
Team Ryan

A. BOSANKO, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13224 PIEDMONT VISTA DRIVE

City HAYMARKET	State VA	Zip Code 20169-2645
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICAROS, INC.	Occupation (for Individual) CEO
---	------------------------------------

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
04		21		2017

Transaction ID : SA11A.502846

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BOSANKO, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13224 PIEDMONT VISTA DRIVE

City HAYMARKET	State VA	Zip Code 20169-2645
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICAROS, INC.	Occupation (for Individual) CEO
---	------------------------------------

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
05		21		2017

Transaction ID : SA11A.506304

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BOSANKO, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13224 PIEDMONT VISTA DRIVE

City HAYMARKET	State VA	Zip Code 20169-2645
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICAROS, INC.	Occupation (for Individual) CEO
---	------------------------------------

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
06		21		2017

Transaction ID : SA11A.512232

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 67 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOSTON, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 173
 City TEMPLE State TX Zip Code 76503-0173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504781
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. BOUMA, BRAD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1659
 City PLAINVIEW State TX Zip Code 79073-1659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508968
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. BOUTAIN, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 PALOMARES AVE
 City VENTURA State CA Zip Code 93003-1738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBIZ MHM, LLC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503732
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5050.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. BOUTAIN, DANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 PALOMARES AVE

City VENTURA	State CA	Zip Code 93003-1738
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CBIZ MHM, LLC	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2017

Transaction ID : SA11A.507471

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BOUTAIN, DANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 PALOMARES AVE

City VENTURA	State CA	Zip Code 93003-1738
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CBIZ MHM, LLC	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2017

Transaction ID : SA11A.513221

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BOWDEN, LARRY, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 BEECHWOOD ST

City LITTLE ROCK	State AR	Zip Code 72205-1903
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504711

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**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 69 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWEN-HASSELL, E. GORDON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11639 CHARTER OAK COURT
 APT. 101
 City RESTON State VA Zip Code 20190-4523
 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 M / D D D / Y Y Y Y Y Y
 05 / 23 / 2017
Transaction ID : SA11A.506033
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BOWEN-HASSELL, E. GORDON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11639 CHARTER OAK COURT
 APT. 101
 City RESTON State VA Zip Code 20190-4523
 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 M / D D D / Y Y Y Y Y Y
 06 / 22 / 2017
Transaction ID : SA11A.512094
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BOWEN-HASSELL, E. GORDON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11639 CHARTER OAK COURT
 APT. 101
 City RESTON State VA Zip Code 20190-4523
 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 M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512415
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 70 OF 1054
(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)
Team Ryan

A. BOYD, DEBBIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1739**

City PORT LAVACA	State TX	Zip Code 77979-1739
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
05 / 16 / 2017

Transaction ID : SA11A.504769

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. BOYD, JEREMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **346 BAY MEADOW DR**

City PORT LAVACA	State TX	Zip Code 77979-4964
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 16 / 2017

Transaction ID : SA11A.504770

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. BOYD, JONATHON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **346 BAY MEADOW DR**

City PORT LAVACA	State TX	Zip Code 77979-4964
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 16 / 2017

Transaction ID : SA11A.504772

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	

**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 71 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOYD, KATIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 1739**
 City **PORT LAVACA** State **TX** Zip Code **77979-1739**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **05 / 16 / 2017**
Transaction ID : SA11A.504771
 Amount of Each Receipt this Period **5000.00**
 Memo Item
CONTRIBUTION

B. BRADBURY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **8116 KERRY LN**
 City **CHEVY CHASE** State **MD** Zip Code **20815-4812**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **THE DUBERSTEIN GROUP** Occupation (for Individual) **CONSULTANT**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2500.00**

Date of Receipt **06 / 29 / 2017**
Transaction ID : SA11A.513024
 Amount of Each Receipt this Period **2500.00**
 Memo Item
CONTRIBUTION

C. BRADSHAW, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **1310 HILLCREST DR.**
 City **STILLWATER** State **MN** Zip Code **55082-5853**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **THE BRADSHAW GROUP, INC** Occupation (for Individual) **FUNERAL DURES**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **04 / 25 / 2017**
Transaction ID : SA11A.503254
 Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7600.00
TOTAL This Period (last page this line number only).....	

**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 72 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADSHAW, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 HILLCREST DR.
 City STILLWATER State MN Zip Code 55082-5853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BRADSHAW GROUP, INC Occupation (for Individual) FUNERAL DURES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 25 / 2017
Transaction ID : SA11A.506710
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRADWAY, ROBERT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1151 HIDDEN VALLEY RD
 City THOUSAND OAKS State CA Zip Code 91361-5046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMGEN INC. Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502947
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. BRALY, ANGELA, F., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 832 ALVERNA DRIVE
 City INDIANAPOLIS State IN Zip Code 46260-4955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BRALY GROUP, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502941
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	52600.00
TOTAL This Period (last page this line number only).....	

**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 73 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRALY, DOUGLAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 832 ALVERNA DR
 City INDIANAPOLIS State IN Zip Code 46260-4955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEADING PROPERTIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502977
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. BRAMSEN, JAMES, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 RIDGE ROAD
 City BARRINGTON State IL Zip Code 60010-9681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPRAYING SYSTEMS CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 23 / 2017
Transaction ID : SA11A.512158
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BRANDALEONE, BRUCE, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6040 OLD FIELD DRIVE
 City CHAPEL HILL State NC Zip Code 27514-8234
 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 05 / 11 / 2017
Transaction ID : SA11A.504989
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3700.00
TOTAL This Period (last page this line number only).....	

**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 74 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANDENBURG, JIMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14424 AMERICAN KESTREL
 City AUSTIN State TX Zip Code 78738-6520
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502346
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BRANDENBURG, JIMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14424 AMERICAN KESTREL
 City AUSTIN State TX Zip Code 78738-6520
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11A.505844
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BRANDENBURG, JIMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14424 AMERICAN KESTREL
 City AUSTIN State TX Zip Code 78738-6520
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2017
Transaction ID : SA11A.511773
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. BRATZ, BETSY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 CUTHBERT LANE

City SAVANNAH	State GA	Zip Code 31411-1637
------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2017

Transaction ID : SA11A.503819

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BRENNAN, JAMES, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 310 TOM BROWN RD

City MOORESTOWN	State NJ	Zip Code 08057-4002
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SEA BOX	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		13		2017

Transaction ID : SA11A.501623

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. BRENNAN, ROSEANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 DUNDEE

City WILLIAMSBURG	State VA	Zip Code 23188-9118
----------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2017

Transaction ID : SA11A.503286

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2800.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 76 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRENNAN, ROSEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 DUNDEE
 City WILLIAMSBURG State VA Zip Code 23188-9118
 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 ▼ 300.00

Date of Receipt 05 / 23 / 2017
Transaction ID : SA11A.506394
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRENNAN, ROSEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 DUNDEE
 City WILLIAMSBURG State VA Zip Code 23188-9118
 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 ▼ 300.00

Date of Receipt 06 / 23 / 2017
Transaction ID : SA11A.512392
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BREWER, EZMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 122ND AVENUE SE
 City BELLEVUE State WA Zip Code 98005-4626
 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 ▼ 1200.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505159
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**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 77 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BREWER, EZMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 122ND AVENUE SE
 City BELLEVUE State WA Zip Code 98005-4626
 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 ▼ 1200.00

Date of Receipt **06 / 22 / 2017**
Transaction ID : SA11A.512087
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. BRIDWELL, TUCKER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1616
 City ABILENE State TX Zip Code 79604-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCHO RESOURCES INC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **05 / 16 / 2017**
Transaction ID : SA11A.504759
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. BRIER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16102 EMERALD ESTATES DRIVE, APT 3
 City WESTON State FL Zip Code 33331-6121
 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 ▼ 400.00

Date of Receipt **05 / 15 / 2017**
Transaction ID : SA11A.505029
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10600.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 78 OF 1054
(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)
Team Ryan

A. BRISKOVICH, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32346 820TH AVE

City OLIVIA	State MN	Zip Code 56277-2591
----------------	-------------	------------------------

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2017

Transaction ID : SA11A.503258

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

B. BRISKOVICH, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32346 820TH AVE

City OLIVIA	State MN	Zip Code 56277-2591
----------------	-------------	------------------------

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	25	/	2017

Transaction ID : SA11A.506721

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

C. BRISKOVICH, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32346 820TH AVE

City OLIVIA	State MN	Zip Code 56277-2591
----------------	-------------	------------------------

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2017

Transaction ID : SA11A.512703

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**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 79 OF 1054
	<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)
Team Ryan

A. BROCK, JOHN, F., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 88 W PACES FERRY RD NW UNIT 1110

City ATLANTA	State GA	Zip Code 30305-1457
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COCA-COLA	Occupation (for Individual) FORMER CEO
--	---

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
05		03		2017

Transaction ID : SA11A.504165

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. BROCK, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1590 FIRST ST.

City SARASOTA	State FL	Zip Code 34236-8502
------------------	-------------	------------------------

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 ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2017

Transaction ID : SA11A.503126

Amount of Each Receipt this Period
55.00

Memo Item
CONTRIBUTION

C. BROCK, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1590 FIRST ST.

City SARASOTA	State FL	Zip Code 34236-8502
------------------	-------------	------------------------

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 ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11A.506282

Amount of Each Receipt this Period
55.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25110.00
TOTAL This Period (last page this line number only).....	

**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 80 OF 1054
	<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)
Team Ryan

A. BROCK, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1590 FIRST ST.
City SARASOTA State FL Zip Code 34236-8502
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 ▼ 330.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512284
Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

B. BROIDY, ELLIOTT, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 710 N RODEO DR
City BEVERLY HILLS State CA Zip Code 90210-3210
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BROIDY CAPITAL MANAGEMENT Occupation (for Individual) CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 62500.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504789
Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. BROIDY, ELLIOTT, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 710 N RODEO DR
City BEVERLY HILLS State CA Zip Code 90210-3210
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BROIDY CAPITAL MANAGEMENT Occupation (for Individual) CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 62500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508856
Amount of Each Receipt this Period 37500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 62555.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 81 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. BROOKS, MARIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 794 1/2 JOSILYN COURT
 City GRAND JUNCTION State CO Zip Code 81506-8654
 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 ▼ 1500.00

Date of Receipt **04 / 26 / 2017**
Transaction ID : SA11A.503306
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BROWDER, ROBERT, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 N MAIN ST
 City TEMPLE State TX Zip Code 76501-7629
 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 ▼ 2500.00

Date of Receipt **05 / 16 / 2017**
Transaction ID : SA11A.504777
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. BROWN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503WESTERNAVE
 City FARIBAULT State MN Zip Code 55021-9267
 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 ▼ 600.00

Date of Receipt **04 / 19 / 2017**
Transaction ID : SA11A.502714
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3100.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 82 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503WESTERNAVE
 City FARIBAULT State MN Zip Code 55021-9267
 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 ▼ 600.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505964
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROWN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503WESTERNAVE
 City FARIBAULT State MN Zip Code 55021-9267
 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 ▼ 600.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511715
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWN, MARY, ROSE, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 VINEYARD
 City SAN ANTONIO State TX Zip Code 78257-1288
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NUSTAR ENERGY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508942
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

**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 83 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, S., BOYCE, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MACARTHUR DR
 City WACO State TX Zip Code 76708-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXTRACO CORPORATION Occupation (for Individual) PRESIDENT AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506061
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. BROWN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10214 N 54TH PL
 City PARADISE VALLEY State AZ Zip Code 85253-1166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.503264
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10214 N 54TH PL
 City PARADISE VALLEY State AZ Zip Code 85253-1166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 25 / 2017
Transaction ID : SA11A.506726
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

**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 84 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. BROWN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10214 N 54TH PL
 City PARADISE VALLEY State AZ Zip Code 85253-1166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 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
 06 / 25 / 2017
Transaction ID : SA11A.512709
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BRUCE, R., T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4215 BOXWOOD DRIVE
 City DENTON State TX Zip Code 76208-7300
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : SA11A.501071
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRUCE, R., T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4215 BOXWOOD DRIVE
 City DENTON State TX Zip Code 76208-7300
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502013
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. BRUCE, R., T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4215 BOXWOOD DRIVE
 City DENTON State TX Zip Code 76208-7300
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503897
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BRUCE, R., T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4215 BOXWOOD DRIVE
 City DENTON State TX Zip Code 76208-7300
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.505241
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRUMM, RICHARD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 5010
 City SANTA BARBARA State CA Zip Code 93150-5010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2017
Transaction ID : SA11A.501558
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**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 86 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. BRUNER, STEPHEN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 LATHROP AVENUE
 UNIT 5E
 City RIVER FOREST State IL Zip Code 60305-1894
 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 ▼ 1000.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503143
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BRUNSON, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6518 16TH ST, N
 City ARLINGTON State VA Zip Code 22205-1836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERIZON Occupation (for Individual) GOVT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.505582
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BRUNS, STEVEN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4885 ALCONY CONOVER RD
 City CONOVER State OH Zip Code 45317-9723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRUNS CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505698
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
TOTAL This Period (last page this line number only)..... ▶

**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 87 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYAN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MAGNOLIA DRIVE
 City WEST POINT State MS Zip Code 39773-9148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLD WAVERLY GOLF CLUB Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 14 / 2017
Transaction ID : SA11A.501635
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. BRYANT, KATHY, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 ROVER RIDGE PT
 City LITTLE ROCK State AR Zip Code 72227-1500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS CAPITAL PTRS Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504686
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

C. BRYANT, RICHARD, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3328 LANDOR ROAD
 City RALEIGH State NC Zip Code 27609-7013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL INV. COS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500949
 Amount of Each Receipt this Period 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10750.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 88 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYANT, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 SUTALLEE RIDGE TRAIL
 City WHITE State GA Zip Code 30184-3035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EBRYIT, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 11 / 2017
Transaction ID : SA11A.501502
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. BRYANT, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 SUTALLEE RIDGE TRAIL
 City WHITE State GA Zip Code 30184-3035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EBRYIT, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11A.505384
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. BRYANT, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 SUTALLEE RIDGE TRAIL
 City WHITE State GA Zip Code 30184-3035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EBRYIT, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 11 / 2017
Transaction ID : SA11A.510060
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 89 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYCE, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 18338
 City MEMPHIS State TN Zip Code 38181-0338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRYCE CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504196
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BUCHANAN, GEORGE, KEVIN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1623 MAIN ST APT 1203
 City DALLAS State TX Zip Code 75201-4769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEVIN BUCHANAN & ASSOCIATES, PLLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508991
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BUCKTAHL, W., , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2028 S AUSTIN STREET, APT 1102
 City AMARILLO State TX Zip Code 79109-1961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PETROLEUM GEOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500998
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 90 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. BUCKTAHL, W., , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2028 S AUSTIN STREET, APT 1102

City AMARILLO	State TX	Zip Code 79109-1961
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PETROLEUM GEOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2017

Transaction ID : SA11A.512113

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. BURKETT, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15502 AMBER HOLLOW LN.

City CYPRESS	State TX	Zip Code 77429-4952
-----------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2017

Transaction ID : SA11A.504102

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BURKETT, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15502 AMBER HOLLOW LN.

City CYPRESS	State TX	Zip Code 77429-4952
-----------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2017

Transaction ID : SA11A.507533

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**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 91 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKETT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15502 AMBER HOLLOW LN.
 City CYPRESS State TX Zip Code 77429-4952
 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 ▼ 300.00

Date of Receipt **06 / 29 / 2017**
Transaction ID : SA11A.513311
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BURNS, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1146 ST PAUL'S PARRISH LANE
 City JOHNS ISLAND State SC Zip Code 29455-8781
 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 ▼ 225.00

Date of Receipt **04 / 27 / 2017**
Transaction ID : SA11A.503500
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. BUSCHE, JERRY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 W 150 N
 City COLUMBIA CITY State IN Zip Code 46725-7870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PDQ WORKHOLDING Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504687
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2625.00
TOTAL This Period (last page this line number only).....	

**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 92 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUSH, BRIAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 HICKORY CREEK DR
 City LITTLE ROCK State AR Zip Code 72212-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504703
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BUSH, JAMES, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6208 WESTLAND DR.
 City KNOXVILLE State TN Zip Code 37919-8218
 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 ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508936
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. BUSH, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 S 58TH AVENUE
 City YAKIMA State WA Zip Code 98908-3429
 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 ▼ 600.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500710
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3100.00
TOTAL This Period (last page this line number only).....	

**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 93 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUSH, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 S 58TH AVENUE
 City YAKIMA State WA Zip Code 98908-3429
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503842
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BUSH, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 S 58TH AVENUE
 City YAKIMA State WA Zip Code 98908-3429
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11A.508126
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BYERS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 DOVER ROAD
 City SANTA BARBARA State CA Zip Code 93103-1864
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503580
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 94 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. BYERS, RICHARD, K., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 S CALHOUN STREET
 City FORT WAYNE State IN Zip Code 46802-5260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUTOMOTIVE COLOR AND SUPPLY CORPORATIO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 7000.00

Date of Receipt **04 / 19 / 2017**
Transaction ID : SA11A.502678
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. BYERS, RICHARD, K., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 S CALHOUN STREET
 City FORT WAYNE State IN Zip Code 46802-5260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUTOMOTIVE COLOR AND SUPPLY CORPORATIO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 7000.00

Date of Receipt **05 / 22 / 2017**
Transaction ID : SA11A.505675
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. BYRD, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 N. MCKINLEY ST. STE. 210
 City LITTLE ROCK State AR Zip Code 72205-3265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 07 / 2017**
Transaction ID : SA11A.508949
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

**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 95 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BYRNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 VILLAGE GREEN
 City VICTORIA State TX Zip Code 77904-3859
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : SA11A.502552
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BYRNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 VILLAGE GREEN
 City VICTORIA State TX Zip Code 77904-3859
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2017
Transaction ID : SA11A.505883
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BYRNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 VILLAGE GREEN
 City VICTORIA State TX Zip Code 77904-3859
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2017
Transaction ID : SA11A.511741
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 96 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALANDRA, FRANK, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 KAPPA DRIVE
 City PITTSBURGH State PA Zip Code 15238-2818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JENNMAR Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500978
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CALLEN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 690 OAK WOOD DRIVE
 City PARK CITY State UT Zip Code 84060-
 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 ▼ 600.00

Date of Receipt 04 / 27 / 2017
Transaction ID : SA11A.503523
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CALLEN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 690 OAK WOOD DRIVE
 City PARK CITY State UT Zip Code 84060-
 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 ▼ 600.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507808
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**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 97 OF 1054
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALLEN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 690 OAK WOOD DRIVE
 City PARK CITY State UT Zip Code 84060-
 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 ▼ 600.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512844
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CAMERON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 HARVESTER DR.
 City LAKE FREDERICK State VA Zip Code 22630-2094
 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 ▼ 260.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11A.503071
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CAMERON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 HARVESTER DR.
 City LAKE FREDERICK State VA Zip Code 22630-2094
 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 ▼ 260.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506514
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 98 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMERON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 HARVESTER DR.
 City LAKE FREDERICK State VA Zip Code 22630-2094
 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 ▼ 260.00

Date of Receipt 06 / 24 / 2017
Transaction ID : SA11A.512719
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CAMPBELL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8837 GREEN ACORN LANE
 City TALLAHASSEE State FL Zip Code 32317-9647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500671
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CAMPBELL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8837 GREEN ACORN LANE
 City TALLAHASSEE State FL Zip Code 32317-9647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 05 / 01 / 2017
Transaction ID : SA11A.503830
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**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 99 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMPBELL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8837 GREEN ACORN LANE
 City TALLAHASSEE State FL Zip Code 32317-9647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 335.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11A.508127
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CAMPBELL, WAYNE, E., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 23RD ST
 City NICEVILLE State FL Zip Code 32578-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 16 / 2017
Transaction ID : SA11A.502394
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CAMPBELL, WAYNE, E., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 23RD ST
 City NICEVILLE State FL Zip Code 32578-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.505596
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 100 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMPBELL, WAYNE, E., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 23RD ST
 City NICEVILLE State FL Zip Code 32578-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 16 / 2017**
Transaction ID : SA11A.511159
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CAMPOS, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O BOX 7284
 City NORTH BERGEN State NJ Zip Code 07047-0984
 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 ▼ 230.00

Date of Receipt **04 / 17 / 2017**
Transaction ID : SA11A.502353
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CAMPOS, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O BOX 7284
 City NORTH BERGEN State NJ Zip Code 07047-0984
 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 ▼ 230.00

Date of Receipt **04 / 28 / 2017**
Transaction ID : SA11A.503715
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**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 101 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMPOS, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O BOX 7284
 City NORTH BERGEN State NJ Zip Code 07047-0984
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2017
Transaction ID : SA11A.504189
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CAMPOS, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O BOX 7284
 City NORTH BERGEN State NJ Zip Code 07047-0984
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2017
Transaction ID : SA11A.504480
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CAMPOS, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O BOX 7284
 City NORTH BERGEN State NJ Zip Code 07047-0984
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11A.505827
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**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 102 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANON, JOSEPH, EDWIN, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 TIQUEWOOD
 City ABILENE State TX Zip Code 79605-4937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DODGE JONES FOUNDATION Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508980
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

B. CARD, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 M ST SE STE 500
 City WASHINGTON State DC Zip Code 20003-3568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARD & ASSOCIATES Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.502987
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. CARLTON, BILL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 OVERLOOK DR
 City LITTLE ROCK State AR Zip Code 72207-1611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARLTON GROUP Occupation (for Individual) FOUNDER AND CEO
 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
 04 / 14 / 2017
Transaction ID : SA11A.501629
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30200.00
TOTAL This Period (last page this line number only).....	

**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 103 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARROLL, DAVID, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5520 PUTNAM DR
 City WEST BLOOMFIELD State MI Zip Code 48323-3720
 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 ▼ 2700.00

Date of Receipt **06 / 22 / 2017**
Transaction ID : SA11A.512069
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. CARROLL, GERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17903 SW 77THCT
 City MIAMI State FL Zip Code 33157-6255
 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 ▼ 250.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : SA11A.503971
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CARROLL, GERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17903 SW 77THCT
 City MIAMI State FL Zip Code 33157-6255
 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 ▼ 250.00

Date of Receipt **05 / 31 / 2017**
Transaction ID : SA11A.508670
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

**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 104 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARROLL, RICHARD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 393 EAGLE DR
 City JUPITER State FL Zip Code 33477-4065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INNOVATIVE DEFENSE STRATEGIES Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504665
 Amount of Each Receipt this Period 20000.00
 Memo Item CONTRIBUTION

B. CARROLL, SUZANNE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 393 EAGLE DRIVE
 City JUPITER State FL Zip Code 33477-4065
 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 ▼ 10000.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504218
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. CARTER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 822 JQ ADAMS ST
 City OREGON CITY State OR Zip Code 97045-1972
 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 ▼ 450.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500715
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	30025.00
TOTAL This Period (last page this line number only).....▶	

**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 105 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. CARTER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 822 JQ ADAMS ST
 City OREGON CITY State OR Zip Code 97045-1972
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2017
Transaction ID : SA11A.501399
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CARTER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 822 JQ ADAMS ST
 City OREGON CITY State OR Zip Code 97045-1972
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503546
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CARTER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 822 JQ ADAMS ST
 City OREGON CITY State OR Zip Code 97045-1972
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503854
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 106 OF 1054
	<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)
Team Ryan

A. CARTER, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 822 JQ ADAMS ST

City OREGON CITY	State OR	Zip Code 97045-1972
---------------------	-------------	------------------------

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2017

Transaction ID : SA11A.505337

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. CARTER, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 822 JQ ADAMS ST

City OREGON CITY	State OR	Zip Code 97045-1972
---------------------	-------------	------------------------

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2017

Transaction ID : SA11A.507798

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. CARTER, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 822 JQ ADAMS ST

City OREGON CITY	State OR	Zip Code 97045-1972
---------------------	-------------	------------------------

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2017

Transaction ID : SA11A.508125

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**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 107 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 822 JQ ADAMS ST
 City OREGON CITY State OR Zip Code 97045-1972
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2017
Transaction ID : SA11A.509717
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CARTER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 822 JQ ADAMS ST
 City OREGON CITY State OR Zip Code 97045-1972
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512831
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CASEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 W EL CAMINO REAL, STE 109 MB
 City SUNNYVALE State CA Zip Code 94087-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL Occupation (for Individual) ENGINEER
 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
 04 / 28 / 2017
Transaction ID : SA11A.503725
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 108 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 W EL CAMINO REAL, STE 109 MB
 City SUNNYVALE State CA Zip Code 94087-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL Occupation (for Individual) ENGINEER
 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
 05 / 28 / 2017
Transaction ID : SA11A.507463
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CASEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 W EL CAMINO REAL, STE 109 MB
 City SUNNYVALE State CA Zip Code 94087-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL Occupation (for Individual) ENGINEER
 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
 06 / 28 / 2017
Transaction ID : SA11A.513216
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CASTRO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5132 WESTPATH WAY
 City BETHESDA State MD Zip Code 20816-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTHOR / INSURANCE
 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
 05 / 26 / 2017
Transaction ID : SA11A.506819
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 109 OF 1054
<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)
Team Ryan

A. CASTRO, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5132 WESTPATH WAY

City BETHESDA	State MD	Zip Code 20816-2318
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTHOR / INSURANCE
--	---

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
06		02		2017

Transaction ID : SA11A.508364

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. CASTRO, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5132 WESTPATH WAY

City BETHESDA	State MD	Zip Code 20816-2318
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTHOR / INSURANCE
--	---

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
06		26		2017

Transaction ID : SA11A.512623

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CASTRO, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7939 CHATEAU POINT LANE

City HOUSTON	State TX	Zip Code 77041-1244
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHELL	Occupation (for Individual) COMMERCIAL DEVELOPMENT MGR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2017

Transaction ID : SA11A.503131

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 110 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. CASTRO, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7939 CHATEAU POINT LANE

City HOUSTON	State TX	Zip Code 77041-1244
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHELL	Occupation (for Individual) COMMERCIAL DEVELOPMENT MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11A.506287

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CASTRO, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7939 CHATEAU POINT LANE

City HOUSTON	State TX	Zip Code 77041-1244
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHELL	Occupation (for Individual) COMMERCIAL DEVELOPMENT MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2017

Transaction ID : SA11A.512279

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CATHCART, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 RESERVE BOULEVARD, STE 300

City CHARLOTTESVILLE	State VA	Zip Code 22901-3233
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
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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
04		17		2017

Transaction ID : SA11A.501990

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**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 111 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CATSIMATIDIS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 817 5TH AVE
 City NEW YORK State NY Zip Code 10065-7254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED REFINING Occupation (for Individual) CHAIRMAN
 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
 05 / 16 / 2017
Transaction ID : SA11A.504761
 Amount of Each Receipt this Period
 25000.00
 Memo Item
CONTRIBUTION

B. CATTAU, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 328 SEAHAWK DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-1849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) FINANCIAL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11A.500742
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. CATTAU, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 328 SEAHAWK DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-1849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) FINANCIAL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503862
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25100.00
TOTAL This Period (last page this line number only).....	

**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 112 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CATTAU, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 328 SEAHAWK DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-1849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) FINANCIAL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11A.508118
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CAVENAUGH, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 429
 City WALNUT RIDGE State AR Zip Code 72476-0429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARKANSAS HOUSE OF REPRESENTATIVES Occupation (for Individual) STATE REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502985
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CELLA, CHARLES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 S MERAMEC AVE
 City ST. LOUIS State MO Zip Code 63105-3542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504680
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6050.00
TOTAL This Period (last page this line number only).....	

**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 113 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CELLA, LOUIS, A., ,			Date of Receipt
Mailing Address 226 S MERAMEC AVE			<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2017"/>
City ST. LOUIS	State MO	Zip Code 63105-3542	Transaction ID : SA11A.504682
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CHADWICK, KIRSTEN, , ,			Date of Receipt
Mailing Address 601 PRESIDENT FORD LANE			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City ALEXANDRIA	State VA	Zip Code 22302-3033	Transaction ID : SA11A.514017
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer (for Individual) FIERCE GOVERNMENT RELATIONS		Occupation (for Individual) CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="7500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CHANDER, SUBHASH, , ,			Date of Receipt
Mailing Address 824 HOG MOUNTAIN ROAD			<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2017"/>
City WINDER	State GA	Zip Code 30680-4404	Transaction ID : SA11A.500719
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) CHANDER EMPIRE INC USA		Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="850.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="7550.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 114 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHANDER, SUBHASH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 824 HOG MOUNTAIN ROAD
 City WINDER State GA Zip Code 30680-4404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHANDER EMPIRE INC USA Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500721
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CHANDER, SUBHASH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 824 HOG MOUNTAIN ROAD
 City WINDER State GA Zip Code 30680-4404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHANDER EMPIRE INC USA Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500724
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CHANDI, SUSANA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42270 SPECTRUM ST
 City INDIO State CA Zip Code 92203-9513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHANDI GROUP USA Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 156200.00

Date of Receipt 04 / 06 / 2017
Transaction ID : SA11A.500879
 Amount of Each Receipt this Period 75000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75200.00
TOTAL This Period (last page this line number only)..... ▶

**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 115 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHANDI, SUSANA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42270 SPECTRUM ST
 City INDIO State CA Zip Code 92203-9513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHANDI GROUP USA Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 156200.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502960
 Amount of Each Receipt this Period 6200.00
 Memo Item CONTRIBUTION

B. CHAPMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BAY FARM LANE; P.O. BOX5
 City WASHINGTON ISLAND State WI Zip Code 54246-0005
 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 ▼ 300.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503419
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CHAPMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BAY FARM LANE; P.O. BOX5
 City WASHINGTON ISLAND State WI Zip Code 54246-0005
 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 ▼ 300.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506857
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6300.00
TOTAL This Period (last page this line number only).....▶	

**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 116 OF 1054		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAPMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BAY FARM LANE; P.O. BOX5
 City WASHINGTON ISLAND State WI Zip Code 54246-0005
 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 ▼ 300.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512630
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CHAPPELL, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2818 UNIVERSITY TER NW
 City WASHINGTON State DC Zip Code 20016-3459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIERCE GOVERNMENT RELATIONS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 08 / 2017
Transaction ID : SA11A.509491
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. CHESTER, DALTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25207 CALLAWAY
 City SAN ANTONIO State TX Zip Code 78260-7260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRANSPORTATION INSURANCE SERVICES Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506096
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 117 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. CHOATE, ARTHUR, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1390 S DIXIE HIGHWAY SUITE 221
 City CORAL GABLES State FL Zip Code 33146-2927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARTMARINE, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505039
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

B. CHRISTOPHER, PHILIP, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 FAIRWAY VIEW DRIVE
 City COMMACK State NY Zip Code 11725-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN NETWORK SOLUTIONS Occupation (for Individual) PRESIDENT AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505866
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

C. CHRISTOPHER, ROBERT, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27891 N. 100TH WAY
 City SCOTTSDALE State AZ Zip Code 85262-8929
 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 ▼ 840.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503432
 Amount of Each Receipt this Period 110.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5610.00
TOTAL This Period (last page this line number only).....	

**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 118 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTOPHER, ROBERT, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27891 N. 100TH WAY
 City SCOTTSDALE State AZ Zip Code 85262-8929
 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 ▼ 840.00

Date of Receipt 04 / 27 / 2017
Transaction ID : SA11A.503526
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CISNE, RICHARD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 WOODBERRY ROAD
 City LITTLE ROCK State AR Zip Code 72212-2742
 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 ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504695
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CLARKE, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5025 GRAND AVE.
 City WESTERN SPRINGS State IL Zip Code 60558-1823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENSINGTON INTERNATIONAL Occupation (for Individual) SEARCH CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 16 / 2017
Transaction ID : SA11A.502398
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**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 119 OF 1054
	<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)
Team Ryan

A. CLARKE, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5025 GRAND AVE.

City WESTERN SPRINGS	State IL	Zip Code 60558-1823
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENSINGTON INTERNATIONAL	Occupation (for Individual) SEARCH CONSULTANT
---	--

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
05		16		2017

Transaction ID : SA11A.505604

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CLARKE, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5025 GRAND AVE.

City WESTERN SPRINGS	State IL	Zip Code 60558-1823
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENSINGTON INTERNATIONAL	Occupation (for Individual) SEARCH CONSULTANT
---	--

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
06		16		2017

Transaction ID : SA11A.511146

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CLARK, CHAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) NOT EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2017

Transaction ID : SA11A.503760

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**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 120 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 SPRUCE HOLLOW ROAD
 City ALUM BANK State PA Zip Code 15521-9216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017
Transaction ID : SA11A.507484
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CLARK, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 SPRUCE HOLLOW ROAD
 City ALUM BANK State PA Zip Code 15521-9216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2017
Transaction ID : SA11A.513179
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CLARKE, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2163 GREENVIEW DRIVE
 City ANN ARBOR State MI Zip Code 48103-6111
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503990
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 121 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARKE, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2163 GREENVIEW DRIVE
 City ANN ARBOR State MI Zip Code 48103-6111
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11A.508661
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CLARKE, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2163 GREENVIEW DRIVE
 City ANN ARBOR State MI Zip Code 48103-6111
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513621
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CLARK, MRS. WM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3716 MAPLEWOOD AVENUE
 City DALLAS State TX Zip Code 75205-2827
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.505240
 Amount of Each Receipt this Period
 600.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**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 122 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 AVENUE D
 410
 City PLATTSMOUTH State NE Zip Code 68048-1055
 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 ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503534
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. CLARK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 AVENUE D
 410
 City PLATTSMOUTH State NE Zip Code 68048-1055
 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 ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506232
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CLARK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 AVENUE D
 410
 City PLATTSMOUTH State NE Zip Code 68048-1055
 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 ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2017
Transaction ID : SA11A.507843
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**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 123 OF 1054
	<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)
Team Ryan

A. CLARK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 AVENUE D
 410
 City PLATTSMOUTH State NE Zip Code 68048-1055
 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 ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512828
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. CLAUSSEN, H., PETER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2408
 City KNOXVILLE State TN Zip Code 37901-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF & OHIO RAILWAYS, INC. Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2017
Transaction ID : SA11A.507926
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. CLAYTON, JAMES, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3340 LAKE VIEW DR
 City KNOXVILLE State TN Zip Code 37919-6667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2017
Transaction ID : SA11A.512053
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	52535.00
TOTAL This Period (last page this line number only).....	

**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 124 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLEMMONS, EARL, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1006 N MONROE ST
 City LITTLE ROCK State AR Zip Code 72205-1943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504717
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CLIFFORD, GEORGANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 W. RIVERSIDE, STE 660
 City SPOKANE State WA Zip Code 99201-0917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT/INVESTM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 09 / 2017
Transaction ID : SA11A.501401
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CLIFFORD, GEORGANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 W. RIVERSIDE, STE 660
 City SPOKANE State WA Zip Code 99201-0917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT/INVESTM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 09 / 2017
Transaction ID : SA11A.505336
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**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 125 OF 1054
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLIFFORD, GEORGANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 W. RIVERSIDE, STE 660
 City SPOKANE State WA Zip Code 99201-0917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT/INVESTM
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 09 / 2017
Transaction ID : SA11A.509719
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CLOUD, STEPHEN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8820 VISTA DRIVE
 City LENEXA State KS Zip Code 66220-8238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IBT, INC. Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505032
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. COBURN, RONALD, O., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1552 JESSE LANE
 City GOLDEN State CO Zip Code 80403-8068
 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 ▼ 450.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11A.504903
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 500.00
TOTAL This Period (last page this line number only).....▶

**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 126 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COCAGNE, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3628 N LAKEWOOD AVE
 City CHICAGO State IL Zip Code 60613-3725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERMILION DEVELOPMENT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504701
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. COFFEY, LOUISE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 7TH AVENUE S
 City NAPLES State FL Zip Code 34102-6857
 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 ▼ 5000.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511238
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. COLLARD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 CARDINAL DRIVE
 City MANKATO State MN Zip Code 56001-6747
 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 ▼ 786.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500725
 Amount of Each Receipt this Period 131.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6131.00
TOTAL This Period (last page this line number only).....	

**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 127 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLARD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 CARDINAL DRIVE
 City MANKATO State MN Zip Code 56001-6747
 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 ▼ 786.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503847
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

B. COLLARD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 CARDINAL DRIVE
 City MANKATO State MN Zip Code 56001-6747
 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 ▼ 786.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11A.508105
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

C. COLON-ESCOBAR, TAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 ROLLING RIDGE DR.
 City DEL RIO State TX Zip Code 78840-2102
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2017
Transaction ID : SA11A.501400
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	312.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 128 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLON-ESCOBAR, TAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 ROLLING RIDGE DR.
 City DEL RIO State TX Zip Code 78840-2102
 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 ▼ 300.00

Date of Receipt 05 / 09 / 2017
Transaction ID : SA11A.505339
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COLON-ESCOBAR, TAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 ROLLING RIDGE DR.
 City DEL RIO State TX Zip Code 78840-2102
 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 ▼ 300.00

Date of Receipt 06 / 09 / 2017
Transaction ID : SA11A.509720
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COMPTON, WILLIAM, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3009 MAPLE AVE
 APT 212
 City DALLAS State TX Zip Code 75201-1229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STANTON LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508990
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5100.00
TOTAL This Period (last page this line number only)..... ▶

**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 129 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONARD, EDWARD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 E 81ST ST
 City NEW YORK State NY Zip Code 10028-0236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 05 / 09 / 2017
Transaction ID : SA11A.504503
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

B. CONNOR, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10510 SPRINGBORO PIKE
 City MIAMISBURG State OH Zip Code 45342-4956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE CONNOR GROUP Occupation (for Individual) CEO & MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 90000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507936
 Amount of Each Receipt this Period 90000.00
 Memo Item
CONTRIBUTION

C. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11A.501066
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	140050.00
TOTAL This Period (last page this line number only).....▶	

**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 130 OF 1054
	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CONNOR, MARIA, , ,

Mailing Address **36 ALLERTON ST**

City BROOKLINE	State MA	Zip Code 02445-7726
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POLYVINYL FILMS	Occupation (for Individual) VP
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 23 / 2017

Transaction ID : SA11A.506360

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CONROY, JAYNE, , MS.,

Mailing Address **319 E 50TH ST APT 11E**

City NEW YORK	State NY	Zip Code 10022-7948
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 07 / 2017

Transaction ID : SA11A.508857

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CONTERNO, ENRIQUE, A., MR.,

Mailing Address **7990 N. MERIDIAN ST.**

City INDIANAPOLIS	State IN	Zip Code 46260-2988
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ELI LILLY & CO	Occupation (for Individual) PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
06 / 07 / 2017

Transaction ID : SA11A.508961

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7600.00
TOTAL This Period (last page this line number only).....	

**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 131 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 EAST AVENUE
 City RIFLE State CO Zip Code 81650-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : SA11A.502269
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. COOK, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 EAST AVENUE
 City RIFLE State CO Zip Code 81650-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2017
Transaction ID : SA11A.505214
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. COOK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10125 WHISPER POINTE DRIVE
 City TAMPA State FL Zip Code 33647-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIFFUSION PHARMACEUTICALS Occupation (for Individual) PHARMACEUTICAL DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2017
Transaction ID : SA11A.503136
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**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 132 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10125 WHISPER POINTE DRIVE
 City TAMPA State FL Zip Code 33647-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIFFUSION PHARMACEUTICALS Occupation (for Individual) PHARMACEUTICAL DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.506286
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COONEY, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5710 N. CAMPBELL AVE
 City TUCSON State AZ Zip Code 85718-4218
 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 ▼ 300.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502884
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COONEY, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5710 N. CAMPBELL AVE
 City TUCSON State AZ Zip Code 85718-4218
 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 ▼ 300.00

Date of Receipt 05 / 21 / 2017
Transaction ID : SA11A.506334
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**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 133 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. COONEY, SHIRLEY, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2017
Mailing Address 5710 N. CAMPBELL AVE			Transaction ID : SA11A.512241
City TUCSON	State AZ	Zip Code 85718-4218	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. COOPER, CHERYL, J., ,			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 28 / 2017
Mailing Address P.O. BOX 547			Transaction ID : SA11A.503665
City OAKWOOD	State OH	Zip Code 45873-0547	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) COOPER FARMS		Occupation (for Individual) AGRICULTURE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. COOPER, LANCE, A., MR.,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2017
Mailing Address 531 ROSELANE STREET STE 200			Transaction ID : SA11A.506058
City MARIETTA	State GA	Zip Code 30060-6970	Amount of Each Receipt this Period 25000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) THE COOPER FIRM		Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 25000.00		

SUBTOTAL of Receipts This Page (optional).....▶	25550.00
TOTAL This Period (last page this line number only).....▶	

**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 134 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COPE, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N57W30614 STEVENS ROAD
 City HARTLAND State WI Zip Code 53029-9378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALKER & DUNLOP Occupation (for Individual) MORTGAGE BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504662
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. CORNELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 WAUBAUNUQUA TRAIL
 City DE PERE State WI Zip Code 54115-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC CHEESE Occupation (for Individual) V/P INDUSTRY RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503730
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CORNELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 WAUBAUNUQUA TRAIL
 City DE PERE State WI Zip Code 54115-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC CHEESE Occupation (for Individual) V/P INDUSTRY RELATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507469
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10100.00
TOTAL This Period (last page this line number only).....▶

**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 135 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORNELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 WAUBAUNUQUA TRAIL
 City DE PERE State WI Zip Code 54115-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC CHEESE Occupation (for Individual) V/P INDUSTRY RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513218
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CORWIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 SAM HOUSTON DR.
 City EL CAMPO State TX Zip Code 77437-9758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503718
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CORWIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 SAM HOUSTON DR.
 City EL CAMPO State TX Zip Code 77437-9758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507458
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 136 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORWIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 SAM HOUSTON DR.
 City EL CAMPO State TX Zip Code 77437-9758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513211
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300METROPOLITAN AVE
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500687
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COWAN, ANSEL, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 54020
 City LUBBOCK State TX Zip Code 79453-4020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWAN-HILL BOND AGENCY Occupation (for Individual) SURETY AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506097
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5150.00
TOTAL This Period (last page this line number only)..... ▶

**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 137 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COWAN, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 54020

City LUBBOCK	State TX	Zip Code 79453-4020
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COWAN-HILL BOND AGENCY	Occupation (for Individual) SURETY AGENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017

Transaction ID : SA11A.509051

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. COWDEN, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3202 RACQUET CLUB DR

City MIDLAND	State TX	Zip Code 79705-6427
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2017

Transaction ID : SA11A.507917

Amount of Each Receipt this Period
5400.00

Memo Item
CONTRIBUTION

C. COWDEN, LINDA, JUNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 LAKES DR

City MIDLAND	State TX	Zip Code 79705-1929
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017

Transaction ID : SA11A.508986

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13100.00
TOTAL This Period (last page this line number only).....	

**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 138 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 WINDSOR ROAD
 City ALEXANDRIA State VA Zip Code 22307-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAVIGATORS GLOBAL LLC Occupation (for Individual) FOUNDING PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513268
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. CRAIG, CHARLES, E., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10123 METRONOME DRIVE
 City HOUSTON State TX Zip Code 77080-6311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRAIG AND HEIDT INC Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.506010
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 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 ▼ 225.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.503244
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2610.00
TOTAL This Period (last page this line number only).....	

**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 139 OF 1054		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 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 ▼ 225.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : SA11A.503985
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 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 ▼ 225.00

Date of Receipt **05 / 25 / 2017**
Transaction ID : SA11A.506696
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 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 ▼ 225.00

Date of Receipt **05 / 31 / 2017**
Transaction ID : SA11A.508644
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**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 140 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2017

Transaction ID : SA11A.509729

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. CRAIG, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2017

Transaction ID : SA11A.512680

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

C. CRAIG, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11A.513582

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**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 141 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRANNEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 W 1300 S
 City OAKLEY State ID Zip Code 83346-9756
 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 ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.503257
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CRANNEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 W 1300 S
 City OAKLEY State ID Zip Code 83346-9756
 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 ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2017
Transaction ID : SA11A.506712
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CRANNEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 W 1300 S
 City OAKLEY State ID Zip Code 83346-9756
 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 ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2017
Transaction ID : SA11A.512699
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**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 142 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAWFORD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2805 CHICHESTER LANE
 City FORT WAYNE State IN Zip Code 46815-8548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R.O.A.P.C. Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504643
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. CREAMER, GLENN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NAYATT ROAD
 City BARRINGTON State RI Zip Code 02806-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROVIDENCE EQUITY PARTNERS INC Occupation (for Individual) SENIOR MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.502989
 Amount of Each Receipt this Period 150000.00
 Memo Item CONTRIBUTION

C. CREAMER, MARY, JANE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NAYATT RD
 City BARRINGTON State RI Zip Code 02806-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.502988
 Amount of Each Receipt this Period 150000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	302000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 143 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROW, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3627 PAPER MILL RD, SE
 City MARIETTA State GA Zip Code 30067-4938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501728
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CROW, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3627 PAPER MILL RD, SE
 City MARIETTA State GA Zip Code 30067-4938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 13 / 2017
Transaction ID : SA11A.505778
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CROW, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3627 PAPER MILL RD, SE
 City MARIETTA State GA Zip Code 30067-4938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 13 / 2017
Transaction ID : SA11A.510280
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**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 144 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRUMPLER, KELLY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1113
 City WASLACE State NC Zip Code 28466-1113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512295
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

B. CUMMINGS, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 HAMILTON STREET
 City EASTON State PA Zip Code 18042-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAFAYETTE COLLEGE Occupation (for Individual) COLLEGE PROFESSOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2017
Transaction ID : SA11A.504287
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 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 ▼ 241.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : SA11A.501076
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2275.00
TOTAL This Period (last page this line number only)..... ▶

**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 145 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 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 ▼ 241.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11A.505790
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CURRIE, NICKIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2308 N COLUMBUS ST
 City ARLINGTON State VA Zip Code 22207-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMGENT INC Occupation (for Individual) DIRECTOR OF GOVERNMENT AFFAI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : SA11A.500797
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. CURRIE, RODGER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2308 N COLUMBUS ST
 City ARLINGTON State VA Zip Code 22207-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHRMA Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : SA11A.502278
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5025.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 146 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURRY, RAVENEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 499 PARK AVE
 City NEW YORK State NY Zip Code 10022-1240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EAGLE CAPITAL Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504201
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.503250
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 25 / 2017
Transaction ID : SA11A.506703
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25100.00
TOTAL This Period (last page this line number only)..... ▶

**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 147 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 25 / 2017
Transaction ID : SA11A.512696
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CUSHMAN, JOHN, C., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 S FIGUERREA ST 47TH FL
 City LOS ANGELES State CA Zip Code 90017-5752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSHMAN AND WAKEFIELD Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.506020
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. CUTBIRTH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 S DWIGHT ST
 City MONAHANS State TX Zip Code 79756-5523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DPS INC Occupation (for Individual) OPERATIONS MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508928
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60050.00
TOTAL This Period (last page this line number only).....▶	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. D'ITALIA, JOSEPH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7116 WOODCROFT LN
 City FORT WAYNE State IN Zip Code 46804-2879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARBOR INVESTMENT Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504698
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. DACEY, SCOTT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 TRENT SHORES DRIVE
 City TRENT WOODS State NC Zip Code 28562-7741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE PACE COMPANIES Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504152
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. DAHLBERG, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 22
 City CAMPBELLTOWN State PA Zip Code 17010-0022
 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 ▼ 3000.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.504009
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

**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 149 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAHLBERG, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 22
 City CAMPBELLTOWN State PA Zip Code 17010-0022
 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 ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507258
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. DAHLBERG, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 22
 City CAMPBELLTOWN State PA Zip Code 17010-0022
 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 ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513630
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. DALTON, MARK, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1A REIMER
 City SCARSDALE State NY Zip Code 10583-2805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TUDOR INVESTMENTS Occupation (for Individual) CEO
 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
 05 / 24 / 2017
Transaction ID : SA11A.506059
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	26000.00
TOTAL This Period (last page this line number only).....▶	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DANNENBAUM, JAMES, D., MR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 W ALABAMA ST
 City HOUSTON State TX Zip Code 77098-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DANNENBAUM ENGINEERING CORP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 04 / 06 / 2017
Transaction ID : SA11A.500880
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. DAVIS, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5823 W. MARQUETTE DR.
 City DENVER State CO Zip Code 80235-3162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF DENVER Occupation (for Individual) AIRPORT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 19 / 2017
Transaction ID : SA11A.502732
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DAVIS, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5823 W. MARQUETTE DR.
 City DENVER State CO Zip Code 80235-3162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF DENVER Occupation (for Individual) AIRPORT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505950
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25100.00
TOTAL This Period (last page this line number only)..... ▶

**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 151 OF 1054
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5823 W. MARQUETTE DR.
 City DENVER State CO Zip Code 80235-3162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF DENVER Occupation (for Individual) AIRPORT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511712
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DAWSON, SAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 TURNBERRY WAY
 City SAN ANTONIO State TX Zip Code 78230-5651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAPE DAWSON ENGINEERS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504166
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. DAY, LARRY, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13261 N VICTOR HUGO AVE
 City PHOENIX State AZ Zip Code 85032-5939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502962
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30050.00
TOTAL This Period (last page this line number only).....	

**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 152 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 729 BEL AIR RD
 City LOS ANGELES State CA Zip Code 90077-3005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OAKMONT CORPORATION Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2017
Transaction ID : SA11A.500922
 Amount of Each Receipt this Period
 100000.00
 Memo Item
 CONTRIBUTION

B. DEATON, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3979 WEST LAUREL ROAD
 City LONDON State KY Zip Code 40741-7864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAUREL RENTALS Occupation (for Individual) LANDLORD
 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
 05 / 05 / 2017
Transaction ID : SA11A.504455
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DEATON, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3979 WEST LAUREL ROAD
 City LONDON State KY Zip Code 40741-7864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAUREL RENTALS Occupation (for Individual) LANDLORD
 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
 06 / 19 / 2017
Transaction ID : SA11A.511671
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 153 OF 1054
(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)
Team Ryan

A. DEATON, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3979 WEST LAUREL ROAD

City LONDON	State KY	Zip Code 40741-7864
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAUREL RENTALS	Occupation (for Individual) LANDLORD
---	---

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
06		19		2017

Transaction ID : SA11A.511672

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DEBUSK, AUTRY, O.V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 DEBUSK LANE

City POWELL	State TN	Zip Code 37849-4703
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEROYAL	Occupation (for Individual) CHAIRMAN
--	---

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
06		12		2017

Transaction ID : SA11A.509446

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. DEER, DANIEL, C., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3920 N OCEAN DR APT 20A

City RIVIERA BEACH	State FL	Zip Code 33404-2813
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AKJ INDUSTRIES	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2017

Transaction ID : SA11A.506581

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	26100.00
TOTAL This Period (last page this line number only).....▶	

**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 154 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEESE, GEORGE, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 318 BEACHSIDE DRIVE

City PANAMA CITY BEACH	State FL	Zip Code 32413-1076
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11A.505686

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. DEGRANGE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12433 CONWAY RD

City CREVE COEUR	State MO	Zip Code 63141-8640
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
860.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2017

Transaction ID : SA11A.500736

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DEGRANGE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12433 CONWAY RD

City CREVE COEUR	State MO	Zip Code 63141-8640
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
860.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2017

Transaction ID : SA11A.503542

Amount of Each Receipt this Period
110.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2660.00
TOTAL This Period (last page this line number only).....	

**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 155 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEGRANGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12433 CONWAY RD
 City CREVE COEUR State MO Zip Code 63141-8640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 860.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507841
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

B. DEGRANGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12433 CONWAY RD
 City CREVE COEUR State MO Zip Code 63141-8640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 860.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512865
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

C. DEISTER, MARK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13110 ABOITE CENTER RD
 City FORT WAYNE State IN Zip Code 46814-9529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEISTER MACHINE COMPANY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504673
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10220.00
TOTAL This Period (last page this line number only).....▶

**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 156 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEJOY, LOUIS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8722
 City GREENSBORO State NC Zip Code 27419-0722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDJ GLOBAL STRATEGIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505861
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. DEKONING, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3087 WATSONS BEND
 City ALPHARETTA State GA Zip Code 30004-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUNICH RE Occupation (for Individual) ACTUARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510561
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. DEL MAR SCHNABEL, MARNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 S BURLINGAME AVE
 City LOS ANGELES State CA Zip Code 90049-2642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502939
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	31000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 157 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEL PAPA, LARRY, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 GULF FWY
 City TEXAS CITY State TX Zip Code 77591-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEL PAPA DISTRIBUTING CO Occupation (for Individual) BEER DISTRIBUTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.508254
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. DELANEW, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 936 MEADOW RD
 City OMAHA State NE Zip Code 68154-3433
 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 ▼ 300.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503951
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DELANEW, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 936 MEADOW RD
 City OMAHA State NE Zip Code 68154-3433
 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 ▼ 300.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11A.508654
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5100.00
TOTAL This Period (last page this line number only)..... ▶

**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 158 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. DELANEW, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 936 MEADOW RD
 City OMAHA State NE Zip Code 68154-3433
 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 ▼ 300.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513690
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DELGADO, JOSE, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12900 W. NORTH AVENUE
 City BROOKFIELD State WI Zip Code 53005-5217
 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 ▼ 2500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504650
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. DELMER, ROBIN, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5096 LONG ISLAND DR
 City ATLANTA State GA Zip Code 30327-4975
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONARCH PRIVATE CAPITAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505687
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5050.00
TOTAL This Period (last page this line number only).....	

**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 159 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELUCA, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 SCARLET OAK COURT
 City APPLETON State WI Zip Code 54915-4512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNATIONAL PAPER Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11A.503068
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DELUCA, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 SCARLET OAK COURT
 City APPLETON State WI Zip Code 54915-4512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNATIONAL PAPER Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506512
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DELUCA, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 SCARLET OAK COURT
 City APPLETON State WI Zip Code 54915-4512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNATIONAL PAPER Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2017
Transaction ID : SA11A.512718
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 160 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENTON, PETER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2660 S OCEAN BLVD UNIT 1035
 City PALM BEACH State FL Zip Code 33480-5487
 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 ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.502983
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

B. DETTWILLER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 GREAT CIRCLE RD
 City NASHVILLE State TN Zip Code 37228-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DET DISTRIBUTING COMPANY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.512966
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. DEUTSCH, PAUL, C., DR., DVM
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2843 HIGHWAY K
 City SAINT CLAIR State MO Zip Code 63077-3575
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : SA11A.504936
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30500.00
TOTAL This Period (last page this line number only).....	

**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 161 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEVANEY, C. WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2909 ROSEFIELD DRIVE
 City HOUSTON State TX Zip Code 77080-2607
 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 05 / 15 / 2017
Transaction ID : SA11A.505075
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. DEVANEY, C. WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2909 ROSEFIELD DRIVE
 City HOUSTON State TX Zip Code 77080-2607
 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 06 / 27 / 2017
Transaction ID : SA11A.512518
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. DEVONE, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26396 BIRTCHE DR
 City LAKE FOREST State CA Zip Code 92630-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENEFITS EXCHANGE ALLIANCE Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 06 / 2017
Transaction ID : SA11A.500882
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10300.00
TOTAL This Period (last page this line number only).....	

**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 162 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 15 AVENUE DE LA MER
APT 2702

City PALM COAST State FL Zip Code 32137-2291

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 ▼
600.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2017

Transaction ID : SA11A.500741

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DEVRIES, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 AVENUE DE LA MER
APT 2702

City PALM COAST State FL Zip Code 32137-2291

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 ▼
600.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2017

Transaction ID : SA11A.503856

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DEVRIES, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 AVENUE DE LA MER
APT 2702

City PALM COAST State FL Zip Code 32137-2291

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 ▼
600.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2017

Transaction ID : SA11A.508110

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEWINE, KEVIN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 506 CRISP WIND CT
 City FAIRBORN State OH Zip Code 45324-8607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBD ADVISORS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505684
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DICKEY, EMERSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5011 BUFFALO COVE RD
 City LENOIR State NC Zip Code 28645-9583
 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 ▼ 250.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503586
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DIETEL, JODY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9121 HARMONY GROVE RD
 City ESCONDIDO State CA Zip Code 92029-5105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAGE WORKS INC. Occupation (for Individual) COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512181
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 164 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DOAN, URSULA, , ,

Mailing Address **2152 ORANGE AVENUE**

City CORCORAN	State CA	Zip Code 93212-1638
-------------------------	--------------------	-------------------------------

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 ▼
250.00

Date of Receipt
05 / 16 / 2017

Transaction ID : SA11A.505247

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DOBOS, STEVEN, M., ,

Mailing Address **11025 LAKE WHITNEY DR**

City TEMPLE	State TX	Zip Code 76502-6477
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE BUTLER WELDMENTS CORP	Occupation (for Individual) PRESIDENT/CEO
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
06 / 02 / 2017

Transaction ID : SA11A.507933

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DODEN, ERIC, R., MR.,

Mailing Address **200 EAST MAIN STREET STE 800**

City FORT WAYNE	State IN	Zip Code 46802-1900
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOMO VENTURES	Occupation (for Individual) OWNER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
05 / 15 / 2017

Transaction ID : SA11A.504852

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3650.00
TOTAL This Period (last page this line number only).....	

**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 165 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLAN, DANIEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 WEST LAUREL AVENUE
 City LAKE FOREST State IL Zip Code 60045-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOLAN MCENIRY Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11A.501572
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DOLAN, DANIEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 WEST LAUREL AVENUE
 City LAKE FOREST State IL Zip Code 60045-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOLAN MCENIRY Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 29 / 2017
Transaction ID : SA11A.507560
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DOLAN, DANIEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 WEST LAUREL AVENUE
 City LAKE FOREST State IL Zip Code 60045-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOLAN MCENIRY Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11A.508245
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**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 166 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLINAK, STEPHEN, THOMAS, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 E WEISGARBER RD STE 180
 City KNOXVILLE State TN Zip Code 37909-2672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510637
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

B. DONALDSON, THOMAS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6226 PARIMA ST
 City LONG BEACH State CA Zip Code 90803-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SOUTHWEST TRAILS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503745
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. DONNELLY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8846 S. SACRAMENTO AVE.
 City EVERGREEN PARK State IL Zip Code 60805-1223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 COOK COUNTY OF ILLINOIS COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501733
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5125.00
TOTAL This Period (last page this line number only).....▶	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DONNELLY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8846 S. SACRAMENTO AVE.
 City EVERGREEN PARK State IL Zip Code 60805-1223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOK COUNTY OF ILLINOIS Occupation (for Individual) COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501734
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DONNELLY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8846 S. SACRAMENTO AVE.
 City EVERGREEN PARK State IL Zip Code 60805-1223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOK COUNTY OF ILLINOIS Occupation (for Individual) COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.503452
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DONNELLY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8846 S. SACRAMENTO AVE.
 City EVERGREEN PARK State IL Zip Code 60805-1223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOK COUNTY OF ILLINOIS Occupation (for Individual) COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11A.505362
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 168 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DONNELLY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8846 S. SACRAMENTO AVE.
 City EVERGREEN PARK State IL Zip Code 60805-1223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOK COUNTY OF ILLINOIS Occupation (for Individual) COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 10 / 2017
Transaction ID : SA11A.510086
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. DOODY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 OAK DALE ROAD
 City ARNOLD State MD Zip Code 21012-2210
 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 ▼ 450.00

Date of Receipt 06 / 11 / 2017
Transaction ID : SA11A.510007
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DOODY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 OAK DALE ROAD
 City ARNOLD State MD Zip Code 21012-2210
 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 ▼ 450.00

Date of Receipt 06 / 21 / 2017
Transaction ID : SA11A.512193
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 355.00
TOTAL This Period (last page this line number only)..... ▶

**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 169 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOODY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 OAK DALE ROAD
 City ARNOLD State MD Zip Code 21012-2210
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : SA11A.512194
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DORAMUS, MARK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 WEST PALISADES
 City LITTLE ROCK State AR Zip Code 72207-1855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.504706
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. DORSETT, THOMAS, H., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2720 TODD DR
 City YADKINVILLE State NC Zip Code 27055-5735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2017
Transaction ID : SA11A.500948
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10600.00
TOTAL This Period (last page this line number only).....	

**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 170 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOTY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9248 SE 70TH TERRACE
 City Ocala State FL Zip Code 34472-3450
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2017
Transaction ID : SA11A.504103
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DOTY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9248 SE 70TH TERRACE
 City Ocala State FL Zip Code 34472-3450
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2017
Transaction ID : SA11A.507535
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DOTY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9248 SE 70TH TERRACE
 City Ocala State FL Zip Code 34472-3450
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.513323
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 171 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOWNING, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 SOUTH VAN ROAD
 City HOLLY State MI Zip Code 48442-8717
 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 ▼ 3000.00

Date of Receipt **04 / 18 / 2017**
Transaction ID : SA11A.502544
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DOWNING, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 SOUTH VAN ROAD
 City HOLLY State MI Zip Code 48442-8717
 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 ▼ 3000.00

Date of Receipt **05 / 18 / 2017**
Transaction ID : SA11A.505899
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DOWNING, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 SOUTH VAN ROAD
 City HOLLY State MI Zip Code 48442-8717
 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 ▼ 3000.00

Date of Receipt **06 / 18 / 2017**
Transaction ID : SA11A.511751
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**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 172 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DOYLE, JAMES, , ,		Date of Receipt MM / DD / YYYY 04 / 07 / 2017 Transaction ID : SA11A.500972
Mailing Address 608 GOLFPARK DRIVE		Amount of Each Receipt this Period 1000.00
City KISSIMMEE	State FL	Zip Code 34747-4629
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DRAGAN, SIMON, , ,		Date of Receipt MM / DD / YYYY 05 / 15 / 2017 Transaction ID : SA11A.504855
Mailing Address 1815 SYCAMORE HILLS DR.		Amount of Each Receipt this Period 20000.00
City FORT WAYNE	State IN	Zip Code 46814-9390
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) WHITLEY MANUFACTURING	Occupation (for Individual) OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DRAGONE, ALLAN, R., MR., JR.		Date of Receipt MM / DD / YYYY 05 / 03 / 2017 Transaction ID : SA11A.504192
Mailing Address 2366 CENTURION CRT STE A		Amount of Each Receipt this Period 7500.00
City DALLAS	State TX	Zip Code 75204-2652
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) FLEETPRIDE	Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 7500.00	

SUBTOTAL of Receipts This Page (optional).....▶	28500.00
TOTAL This Period (last page this line number only).....▶	

**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 173 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRAPER, HEATHER, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3250 S OCEAN BLVD 204N
 City PALM BEACH State FL Zip Code 33480-6693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.510556
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. DREEBEN, ALAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6511 TRI COUNTY PKWY
 City SCHERTZ State TX Zip Code 78154-3219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REPUBLIC BEVERAGE CO Occupation (for Individual) EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 30000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : SA11A.504484
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. DREEBEN, ALAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6511 TRI COUNTY PKWY
 City SCHERTZ State TX Zip Code 78154-3219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REPUBLIC BEVERAGE CO Occupation (for Individual) EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 30000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506017
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	31000.00
TOTAL This Period (last page this line number only).....	

**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 174 OF 1054
	<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)
Team Ryan

A. DRENNEN, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 718 WALNUT ST

City KENT	State WA	Zip Code 98030-6368
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEDIATRIC INTERIM CARE CENTER	Occupation (for Individual) EXECUTIVE DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
04 / 07 / 2017

Transaction ID : SA11A.501300

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

REFUNDED \$250.00 ON 05/18/2017

B. DRIESSEN, PAUL, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8760 COPELAND POND COURT

City FAIRFAX	State VA	Zip Code 22031-2739
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GLOBAL-COMM PARTNERS	Occupation (for Individual) ENERGY POLICY ANALYST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2017

Transaction ID : SA11A.504015

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DRIESSEN, PAUL, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8760 COPELAND POND COURT

City FAIRFAX	State VA	Zip Code 22031-2739
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GLOBAL-COMM PARTNERS	Occupation (for Individual) ENERGY POLICY ANALYST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2017

Transaction ID : SA11A.507264

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 175 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRIESSEN, PAUL, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8760 COPELAND POND COURT
 City FAIRFAX State VA Zip Code 22031-2739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL-COMM PARTNERS Occupation (for Individual) ENERGY POLICY ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513703
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DRIGGS, DARRYL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1235 WHITEHALL DRIVE
 City BOISSER CITY State LA Zip Code 71112-4585
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 27 / 2017
Transaction ID : SA11A.503329
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DRURY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1501 E PRAIRIE AVE
 City WHEATON State IL Zip Code 60187-3754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL PLANNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501328
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 176 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUBOSE, SAMUEL, I., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 INTERLOCHEN DRIVE NE
 City ATLANTA State GA Zip Code 30342-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WHITE ELECTRICAL CONSTRUCTION Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.508265
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. DUBOSE, VIVIAN, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 18651
 City ATLANTA State GA Zip Code 31126-0651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOBLE PROPERTIES Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504758
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. DUNAGAN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 HOOPER WAY
 City ANCHORAGE State AK Zip Code 99515-2340
 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 ▼ 500.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503932
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3600.00
TOTAL This Period (last page this line number only)..... ▶

**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 177 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNAGAN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 HOOPER WAY
 City ANCHORAGE State AK Zip Code 99515-2340
 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 ▼ 500.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507293
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUNKLIN, GEORGE, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1854 HWY 152
 City HUMPHREY State AR Zip Code 72073-9062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMERS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.504860
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 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 ▼ 600.00

Date of Receipt 04 / 29 / 2017
Transaction ID : SA11A.504091
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2900.00
TOTAL This Period (last page this line number only).....	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 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 ▼ 600.00

Date of Receipt 05 / 29 / 2017
Transaction ID : SA11A.507516
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 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 ▼ 600.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513320
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DYE, R., BRUCE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5626 ABBEYHILL RD
 City FORT WAYNE State IN Zip Code 46814-7560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERITAGE FOOD SERVICE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504681
 Amount of Each Receipt this Period 20000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 20200.00
TOTAL This Period (last page this line number only).....▶

**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 179 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. EASTON, RANDALL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 FIRST STREET SE SUITE 420
 City CEDAR RAPIDS State IA Zip Code 52401-2032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 23 / 2017
Transaction ID : SA11A.503096
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EBERSOLE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVE.
 City HUMMELSTOWN State PA Zip Code 17036-9720
 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 ▼ 350.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501357
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EBERSOLE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVE.
 City HUMMELSTOWN State PA Zip Code 17036-9720
 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 ▼ 350.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502873
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 180 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EBERSOLE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVE.
 City HUMMELSTOWN State PA Zip Code 17036-9720
 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 ▼ 350.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11A.505351
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EBERSOLE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVE.
 City HUMMELSTOWN State PA Zip Code 17036-9720
 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 ▼ 350.00

Date of Receipt 05 / 21 / 2017
Transaction ID : SA11A.506323
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EBERSOLE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVE.
 City HUMMELSTOWN State PA Zip Code 17036-9720
 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 ▼ 350.00

Date of Receipt 06 / 10 / 2017
Transaction ID : SA11A.510079
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**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 181 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EBERSOLE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVE.
 City HUMMELSTOWN State PA Zip Code 17036-9720
 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 ▼ 350.00

Date of Receipt 06 / 21 / 2017
Transaction ID : SA11A.512234
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EBRAHIMI, ALI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9801 WESTHEIMER SUITE 250
 City HOUSTON State TX Zip Code 77042-3951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERS A GRAE CORPORATION Occupation (for Individual) DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506468
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. ECHOLS, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5909 PEACHTREE DUNWOODY RD STE 400
 City ATLANTA State GA Zip Code 30328-8101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE WORTHING COMPANIES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504191
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11025.00
TOTAL This Period (last page this line number only).....	

**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 182 OF 1054
	<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)
Team Ryan

A. ECKHOFF, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7250 175TH AVE NW
 City RAMSEY State MN Zip Code 55303-3039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOD Occupation (for Individual) UNIT ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503397
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ECKHOFF, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7250 175TH AVE NW
 City RAMSEY State MN Zip Code 55303-3039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOD Occupation (for Individual) UNIT ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503422
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR.
 City CANTON State GA Zip Code 30115-2403
 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 ▼ 600.00

Date of Receipt 04 / 23 / 2017
Transaction ID : SA11A.503101
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 183 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR.

City CANTON State GA Zip Code 30115-2403

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 ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017

Transaction ID : SA11A.503462

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR.

City CANTON State GA Zip Code 30115-2403

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 ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017

Transaction ID : SA11A.504030

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR.

City CANTON State GA Zip Code 30115-2403

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 ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2017

Transaction ID : SA11A.506390

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

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

FOR LINE NUMBER: PAGE 184 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR.
 City CANTON State GA Zip Code 30115-2403
 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 ▼ 600.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507811
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR.
 City CANTON State GA Zip Code 30115-2403
 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 ▼ 600.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11A.508652
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR.
 City CANTON State GA Zip Code 30115-2403
 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 ▼ 600.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512819
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 185 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR.
 City CANTON State GA Zip Code 30115-2403
 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 ▼ 600.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513656
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EINHORN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8205 N RIVER ROAD
 City MILWAUKEE State WI Zip Code 53217-2546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL MIDWEST FUND Occupation (for Individual) VENTURE CAPITALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504755
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. EISENSHTADT, JEFFREY, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4871 N HARSDALE RD
 City BLOOMFIELD HILLS State MI Zip Code 48302-2412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TITLE SOURCE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512068
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 6450.00
TOTAL This Period (last page this line number only).....▶

**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 186 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EISENHOWER, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 WINTER CAMP TRAIL
 City HEDGESVILLE State WV Zip Code 25427-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOUIS BERGER Occupation (for Individual) CONSTRUCTION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 20 / 2017
Transaction ID : SA11A.502792
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EISENHOWER, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 WINTER CAMP TRAIL
 City HEDGESVILLE State WV Zip Code 25427-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOUIS BERGER Occupation (for Individual) CONSTRUCTION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 20 / 2017
Transaction ID : SA11A.506341
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EISENHOWER, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 WINTER CAMP TRAIL
 City HEDGESVILLE State WV Zip Code 25427-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOUIS BERGER Occupation (for Individual) CONSTRUCTION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511933
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 187 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. EL-HIBRI, FUAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13675 VANDERBILT DR UNIT 710

City NAPLES	State FL	Zip Code 34110-6121
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EMERGENT BIOSOLUTIONS	Occupation (for Individual) EXECUTIVE
--	--

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
 06 / 12 / 2017

Transaction ID : SA11A.509438

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. EL-HIBRI, NANCY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13675 VANDERBILT DR UNIT 710

City NAPLES	State FL	Zip Code 34110-6121
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EL HIBRI FOUNDATION	Occupation (for Individual) EXECUTIVE
--	--

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
 06 / 12 / 2017

Transaction ID : SA11A.509435

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. ELDEMIR, KIRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2452. WASHINGTON ST

City SAN FRANCISCO	State CA	Zip Code 94115-1831
-----------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2017

Transaction ID : SA11A.503138

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50050.00
TOTAL This Period (last page this line number only).....	

**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 188 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. ELDEMIR, KIRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2452. WASHINGTON ST
 City SAN FRANCISCO State CA Zip Code 94115-1831
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506284
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ELDEMIR, KIRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2452. WASHINGTON ST
 City SAN FRANCISCO State CA Zip Code 94115-1831
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2017
Transaction ID : SA11A.512282
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ELIASSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 20TH ST SO
 City VIRGINIA State MN Zip Code 55792-3724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503947
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 189 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELIASSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 20TH ST SO
 City VIRGINIA State MN Zip Code 55792-3724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507289
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ELIASSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 20TH ST SO
 City VIRGINIA State MN Zip Code 55792-3724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513688
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ELLIOT, GREG, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 CAPITOL ST
 City CHARLESTON State WV Zip Code 25301-2221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMFM Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510829
 Amount of Each Receipt this Period 20000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 20100.00
TOTAL This Period (last page this line number only).....▶

**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 190 OF 1054
	<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)
Team Ryan

A. ELLIS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6703 AVONDALE DRIVE

City OKLAHOMA CITY	State OK	Zip Code 73116-6001
-----------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2017

Transaction ID : SA11A.503302

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. ELLIS, RYAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1605 STONEBRIDGE RD

City ALEXANDRIA	State VA	Zip Code 22304-1036
--------------------	-------------	------------------------

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 ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2017

Transaction ID : SA11A.512800

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

C. ELMORE, MARSHA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1005 FM 1340

City HUNT	State TX	Zip Code 78024-3027
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) O/D OF WALDEMAR
--	--

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
04		20		2017

Transaction ID : SA11A.502796

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 191 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELMORE, MARSHA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 FM 1340
 City HUNT State TX Zip Code 78024-3027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) O/D OF WALDEMAR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 20 / 2017
Transaction ID : SA11A.506346
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ELMORE, MARSHA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 FM 1340
 City HUNT State TX Zip Code 78024-3027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) O/D OF WALDEMAR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511940
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EMANUEL, PETER, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 CANYON RIDGE CT
 City LITTLE ROCK State AR Zip Code 72223-5982
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ARKANSAS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504490
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**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 192 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EMMERSON, MARK, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 496028

City REDDING	State CA	Zip Code 96049-6028
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIERRA PACIFIC INDUSTRIES	Occupation (for Individual) CFO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.504667

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. ENGLER, KURT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1520 MINTHAVEN RD.

City LAKE FOREST	State IL	Zip Code 60045-3503
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) W.L. ENGLER DIST.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2017
Transaction ID : SA11A.504079

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. ENGLER, KURT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1520 MINTHAVEN RD.

City LAKE FOREST	State IL	Zip Code 60045-3503
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) W.L. ENGLER DIST.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11A.508521

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**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 193 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ECONOMY JR., ANAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 ESANDY LAKE ROAD
 303
 City COPPELL State TX Zip Code 75019-7387
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503529
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ECONOMY JR., ANAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 ESANDY LAKE ROAD
 303
 City COPPELL State TX Zip Code 75019-7387
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2017
Transaction ID : SA11A.507829
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ECONOMY JR., ANAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 ESANDY LAKE ROAD
 303
 City COPPELL State TX Zip Code 75019-7387
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512861
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 194 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EUBANKS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1479 DEER HOLLOW DR.
 City CORONA State CA Zip Code 92882-6069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WMC Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 18 / 2017
Transaction ID : SA11A.502545
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. EUBANKS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1479 DEER HOLLOW DR.
 City CORONA State CA Zip Code 92882-6069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WMC Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.505892
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. EUBANKS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1479 DEER HOLLOW DR.
 City CORONA State CA Zip Code 92882-6069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WMC Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 18 / 2017
Transaction ID : SA11A.511750
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 195 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. EVANS, DONALD, L., SECRETARY,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 50990

City MIDLAND	State TX	Zip Code 79710-0990
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) THE DON EVANS GROUP		Occupation (for Individual) OIL & GAS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
04 / 25 / 2017
Transaction ID : SA11A.502943

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. EVANS, JAMES, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 301 E 4TH ST 40TH FL

City CINCINNATI	State OH	Zip Code 45202-4245
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) AMERICAN FINANCIAL GROUP		Occupation (for Individual) CONSULTANT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2017
Transaction ID : SA11A.504329

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. EVERIST, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 709 TOMAR RD.

City SIOUX FALLS	State SD	Zip Code 57105-7053
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
04 / 22 / 2017
Transaction ID : SA11A.503135

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12550.00
TOTAL This Period (last page this line number only).....▶	

**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 197 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAHNER, TYRONE, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 S WACKER DR
 City CHICAGO State IL Zip Code 60606-4637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAYER BROWN Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501621
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. FAIRCLOTH, ANNE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 N CHESTNUT ST
 City CLINTON State NC Zip Code 28328-3925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504161
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. FARINA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PALMA ROAD
 City SOMERS State NY Zip Code 10589-2807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST-FAIR ELECTRIC Occupation (for Individual) ELECTRIC CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501323
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	15100.00
TOTAL This Period (last page this line number only).....▶	

**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 198 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARMER, GARY, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 LAKE CLIFF TRAIL
 City AUSTIN State TX Zip Code 78746-4678
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERITAGE TITLE Occupation (for Individual) TITLE INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512048
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. FARMER, THOMAS, E., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1501 BLOVU
 City GALVESTON State TX Zip Code 77551-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FARMERS ALLOY Occupation (for Individual) METAL FABRICATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513027
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. FARROW, JACKSON, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 RIVER RIDGE CR
 City LITTLE ROCK State AR Zip Code 72227-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS CAPITAL PARTNERS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504693
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

**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 199 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARZANEH, JALAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 497 MANOR HILL DR
 City NORMAN State OK Zip Code 73072-3978
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOME CREATIONS Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506583
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. FARZANEH, MOHAMMAD, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 CRYSTAL SPRING DR
 City NORMAN State OK Zip Code 73072-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506582
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. FASCITELLI, MICHAEL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 888 7TH AVE 27TH FL
 City NEW YORK State NY Zip Code 10106-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502945
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	27000.00
TOTAL This Period (last page this line number only).....	

**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 200 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAULKNER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 958 BROWNSTONE TRACE
 City CARMEL State IN Zip Code 46032-4673
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2017
Transaction ID : SA11A.506410
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FAULKNER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 958 BROWNSTONE TRACE
 City CARMEL State IN Zip Code 46032-4673
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017
Transaction ID : SA11A.507498
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FAULKNER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 958 BROWNSTONE TRACE
 City CARMEL State IN Zip Code 46032-4673
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2017
Transaction ID : SA11A.511662
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 201 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. FEENEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10633 NATHANIEL WAY
 City NEW MARKET State MD Zip Code 21774-6278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DMV DRYWALL, LLC Occupation (for Individual) MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 07 / 2017**
Transaction ID : SA11A.501286
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FEENEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10633 NATHANIEL WAY
 City NEW MARKET State MD Zip Code 21774-6278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DMV DRYWALL, LLC Occupation (for Individual) MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 07 / 2017**
Transaction ID : SA11A.505288
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FEHSENFELD, FRED, M., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 68123
 City INDIANAPOLIS State IN Zip Code 46268-0123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASPHALT MATERIALS, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **05 / 03 / 2017**
Transaction ID : SA11A.504157
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25100.00
TOTAL This Period (last page this line number only).....	

**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 202 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FELTEN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32441 EAGALESET AVE
 City AGUA DULCE State CA Zip Code 91390-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCI Occupation (for Individual) EXECUTIVE ASSIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 08 / 2017**
Transaction ID : SA11A.501456
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FELTEN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32441 EAGALESET AVE
 City AGUA DULCE State CA Zip Code 91390-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCI Occupation (for Individual) EXECUTIVE ASSIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 08 / 2017**
Transaction ID : SA11A.505267
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FELTEN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32441 EAGALESET AVE
 City AGUA DULCE State CA Zip Code 91390-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCI Occupation (for Individual) EXECUTIVE ASSIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 10 / 2017**
Transaction ID : SA11A.510085
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 203 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FENOGLIO, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17701 BENT OAK LANE
 City DALLAS State TX Zip Code 75287-6704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T Occupation (for Individual) MANAGER
 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
 04 / 01 / 2017
Transaction ID : SA11A.500712
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. FENOGLIO, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17701 BENT OAK LANE
 City DALLAS State TX Zip Code 75287-6704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T Occupation (for Individual) MANAGER
 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
 05 / 01 / 2017
Transaction ID : SA11A.503831
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. FENOGLIO, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17701 BENT OAK LANE
 City DALLAS State TX Zip Code 75287-6704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T Occupation (for Individual) MANAGER
 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
 06 / 01 / 2017
Transaction ID : SA11A.508097
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 204 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERGUSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7601 CHARLESTON DRIVE
 City BETHESDA State MD Zip Code 20817-1422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAKER HOSTETLER Occupation (for Individual) SENIOR ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 04 / 18 / 2017
Transaction ID : SA11A.502559
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. FERGUSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7601 CHARLESTON DRIVE
 City BETHESDA State MD Zip Code 20817-1422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAKER HOSTETLER Occupation (for Individual) SENIOR ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.505898
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. FERGUSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7601 CHARLESTON DRIVE
 City BETHESDA State MD Zip Code 20817-1422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAKER HOSTETLER Occupation (for Individual) SENIOR ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 06 / 18 / 2017
Transaction ID : SA11A.511754
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**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 205 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERGUSON, STEPHEN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1608
 City BLOOMINGTON State IN Zip Code 47402-1608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504675
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. FERRY, RICHARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 9TH AVENUE 1102
 City SEATTLE State WA Zip Code 98104-2051
 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 ▼ 1000.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503881
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. FERTITTA, FRANK, J., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 379045
 City LAS VEGAS State NV Zip Code 89137-9045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED ROCK RESORTS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504764
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	56000.00
TOTAL This Period (last page this line number only).....	

**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 206 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERTITTA, JILL, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 379045
 City LAS VEGAS State NV Zip Code 89137-9045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE ANIMAL FOUNDATION Occupation (for Individual) EVENT CO-CHAIR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504763
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

B. FERTITTA, LORENZO, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 379045
 City LAS VEGAS State NV Zip Code 89137-9045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED ROCK RESORTS Occupation (for Individual) VICE CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504766
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

C. FERTITTA, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 379045
 City LAS VEGAS State NV Zip Code 89137-9045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504765
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 207 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LN
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506461
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LN
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506462
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LN
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511593
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 208 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FILOTEO, HARRIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 776
 City LEBEC State CA Zip Code 93243-0776
 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 ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2017
Transaction ID : SA11A.503118
 Amount of Each Receipt this Period
 110.00
 Memo Item
 CONTRIBUTION

B. FILOTEO, HARRIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 776
 City LEBEC State CA Zip Code 93243-0776
 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 ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506280
 Amount of Each Receipt this Period
 110.00
 Memo Item
 CONTRIBUTION

C. FILOTEO, HARRIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 776
 City LEBEC State CA Zip Code 93243-0776
 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 ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2017
Transaction ID : SA11A.512277
 Amount of Each Receipt this Period
 110.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00
TOTAL This Period (last page this line number only)..... ▶

**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 209 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINIZIO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17551 GRAND ESTATE WAY
 City BOCA RATON State FL Zip Code 33496-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THERAPEUTICSMD Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.512795
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION

B. FINLEY, DANIEL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 27535
 City HOUSTON State TX Zip Code 77227-7535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503679
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

C. FINNERAN, JOY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 INTERPARK BLVD STE 104
 City SAN ANTONIO State TX Zip Code 78216-1844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XENEX SERVICES Occupation (for Individual) ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.509044
 Amount of Each Receipt this Period
 2700.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	

**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 210 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIORE, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 893 AMHERST LANE
 City WESTMINSTER State MD Zip Code 21158-4350
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11A.508507
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. FIRESTONE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 349 FAIRFIELD AVENUE
 City GRETNA State LA Zip Code 70056-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.503243
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FISCHER, DAVID, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1795 MAPLELAWN DR
 City TROY State MI Zip Code 48084-4609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SUBURBAN COLLECTION Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.512963
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50600.00
TOTAL This Period (last page this line number only).....	

**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 211 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 374
 1405 S. 200 W.
 City MONA State UT Zip Code 84645-0374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2017
Transaction ID : SA11A.502392
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FISH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 374
 1405 S. 200 W.
 City MONA State UT Zip Code 84645-0374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.505595
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. FISH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 374
 1405 S. 200 W.
 City MONA State UT Zip Code 84645-0374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.511143
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 212 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, CYNTHIA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 PARK ST
 City NEWTON State MA Zip Code 02458-2044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATERREV LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 133500.00

Date of Receipt **06 / 12 / 2017**
Transaction ID : SA11A.509448
 Amount of Each Receipt this Period 33500.00
 Memo Item CONTRIBUTION

B. FISHER, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3040 JAVA ROAD
 City COSTA MESA State CA Zip Code 92626-3506
 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 **04 / 17 / 2017**
Transaction ID : SA11A.501965
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. FISKEN, NIKOLAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 SHERWOOD RD
 City LITTLE ROCK State AR Zip Code 72207-5425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 03 / 2017**
Transaction ID : SA11A.504195
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	34500.00
TOTAL This Period (last page this line number only).....▶	

**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 213 OF 1054
	<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)
Team Ryan

A. FITZGERALD, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 38 ROSEWOOD DR.
City HAWTHORN WOODS State IL Zip Code 60047-7713
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) YASKAWA AMERICA Occupation (for Individual) SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 21 / 2017
Transaction ID : SA11A.512201
Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. FLATH, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 123
City DEER HARBOR State WA Zip Code 98243-0123
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 ▼ 500.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511473
Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. FLETCHER, JOHN, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2600 N PIERCE ST
City LITTLE ROCK State AR Zip Code 72207-3623
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) WINDSTREAM Occupation (for Individual) ATTORNEY
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504691
Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**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 214 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOOD, CARL, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11695 OKEEFE CREEK BOULEVARD

City MISSOULA	State MT	Zip Code 59808-8596
------------------	-------------	------------------------

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 ▼
400.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2017

Transaction ID : SA11A.511372

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. FLORES, JEANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17107 SUMMIT HILLS DRIVE

City SANTA CLARITA	State CA	Zip Code 91387-3194
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 12 / 2017

Transaction ID : SA11A.501602

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FLORES, JEANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17107 SUMMIT HILLS DRIVE

City SANTA CLARITA	State CA	Zip Code 91387-3194
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2017

Transaction ID : SA11A.505416

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**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 215 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 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 ▼ 450.00

Date of Receipt 04 / 23 / 2017
Transaction ID : SA11A.503104
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 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 ▼ 450.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503920
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 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 ▼ 450.00

Date of Receipt 05 / 23 / 2017
Transaction ID : SA11A.506397
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 216 OF 1054
(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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FOERSTER, CHARLENE, , ,

Mailing Address 235 WILLOWBEND ST

City HUNTSVILLE	State TX	Zip Code 77320-3423
--------------------	-------------	------------------------

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11A.507288

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FOERSTER, CHARLENE, , ,

Mailing Address 235 WILLOWBEND ST

City HUNTSVILLE	State TX	Zip Code 77320-3423
--------------------	-------------	------------------------

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2017

Transaction ID : SA11A.512396

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FOERSTER, CHARLENE, , ,

Mailing Address 235 WILLOWBEND ST

City HUNTSVILLE	State TX	Zip Code 77320-3423
--------------------	-------------	------------------------

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11A.513652

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**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 217 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DOVERTON DRIVE
 City GREENWICH State CT Zip Code 06831-3318
 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 ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.504005
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FORD, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DOVERTON DRIVE
 City GREENWICH State CT Zip Code 06831-3318
 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 ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507255
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FORD, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DOVERTON DRIVE
 City GREENWICH State CT Zip Code 06831-3318
 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 ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513615
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 218 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4630 HUMMINGBIRD STREET
 City HOUSTON State TX Zip Code 77035-5126
 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 ▼ 300.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11A.500560
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FORD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4630 HUMMINGBIRD STREET
 City HOUSTON State TX Zip Code 77035-5126
 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 ▼ 300.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500684
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FORD, GERALD, J., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 CRESCENT CT STE 1350
 City DALLAS State TX Zip Code 75201-6988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIAMOND-A FORD Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512055
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**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 219 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOSTER, JOHN, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1348 PEPPER TREE DRIVE

City HEMET	State CA	Zip Code 92545-8149
---------------	-------------	------------------------

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 ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2017

Transaction ID : SA11A.503305

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

B. FOSTER, JOHN, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1348 PEPPER TREE DRIVE

City HEMET	State CA	Zip Code 92545-8149
---------------	-------------	------------------------

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 ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2017

Transaction ID : SA11A.504866

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FOUGHT, E. LOUISE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3305 CHRISTIE BOULEVARD

City TOLEDO	State OH	Zip Code 43606-2862
----------------	-------------	------------------------

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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2017

Transaction ID : SA11A.504523

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**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 220 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOUGHT, E. LOUISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3305 CHRISTIE BOULEVARD
 City TOLEDO State OH Zip Code 43606-2862
 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 ▼ 400.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511232
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. FOURNIER, FRONA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 437 S ADAMS STREET
 City HINSDALE State IL Zip Code 60521-3908
 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 ▼ 258.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503144
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FOURNIER, FRONA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 437 S ADAMS STREET
 City HINSDALE State IL Zip Code 60521-3908
 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 ▼ 258.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11A.505219
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	370.00
TOTAL This Period (last page this line number only).....	

**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 221 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANKLIN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 W. TOWNLINE RD
 City PHELPS State NY Zip Code 14532-9301
 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 ▼ 250.00

Date of Receipt **04 / 21 / 2017**
Transaction ID : SA11A.502860
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FRANKLIN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 W. TOWNLINE RD
 City PHELPS State NY Zip Code 14532-9301
 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 ▼ 250.00

Date of Receipt **05 / 21 / 2017**
Transaction ID : SA11A.506299
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FRANKOVICH, F., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 883
 City ISLAND HEIGHTS State NJ Zip Code 08732-0883
 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 ▼ 250.00

Date of Receipt **06 / 16 / 2017**
Transaction ID : SA11A.510702
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**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 222 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANK, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10183 NW 74TH AVE
 City GRIMES State IA Zip Code 50111-8750
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017
Transaction ID : SA11A.501605
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. FRANK, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10183 NW 74TH AVE
 City GRIMES State IA Zip Code 50111-8750
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.505415
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. FRANK, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10183 NW 74TH AVE
 City GRIMES State IA Zip Code 50111-8750
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2017
Transaction ID : SA11A.509999
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 223 OF 1054
	<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)
Team Ryan

A. FRANSSON, MARTHA, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11 DODGE DRIVE

City WEST HARTFORD	State CT	Zip Code 06107-1009
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
06 / 20 / 2017
Transaction ID : SA11A.511868

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. FRAZIER, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 46A ANCHOR DRIVE

City KEY LARGO	State FL	Zip Code 33037-5283
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00

Date of Receipt
04 / 23 / 2017
Transaction ID : SA11A.503285

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FRAZIER, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 46A ANCHOR DRIVE

City KEY LARGO	State FL	Zip Code 33037-5283
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 900.00

Date of Receipt
05 / 23 / 2017
Transaction ID : SA11A.506392

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**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 224 OF 1054
	<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)
Team Ryan

A. FRAZIER, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46A ANCHOR DRIVE

City KEY LARGO	State FL	Zip Code 33037-5283
-------------------	-------------	------------------------

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 ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2017

Transaction ID : SA11A.512400

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FREDERICK, TOWWNSEND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1506 LAKESIDE DR. SW

City ALEXANDRIA	State MN	Zip Code 56308-2310
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SANFORD HEALTH BROADWAY CLINIC	Occupation (for Individual) PHYSICIAN
---	--

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
04		09		2017

Transaction ID : SA11A.501402

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FREDERICK, TOWWNSEND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1506 LAKESIDE DR. SW

City ALEXANDRIA	State MN	Zip Code 56308-2310
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SANFORD HEALTH BROADWAY CLINIC	Occupation (for Individual) PHYSICIAN
---	--

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
05		09		2017

Transaction ID : SA11A.505338

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 225 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. FREDERICK, TOWWNSEND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1506 LAKESIDE DR. SW
 City ALEXANDRIA State MN Zip Code 56308-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SANFORD HEALTH BROADWAY CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 09 / 2017
Transaction ID : SA11A.509721
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FREELAND, DEANNA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7100 JEFFERSON BLVD
 City FORT WAYNE State IN Zip Code 46804-6236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIZZA HUT OF FT. WAYNE, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504690
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. FREEMAN, BRADFORD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11100 SANTA MONICA BLVD STE 1900
 City LOS ANGELES State CA Zip Code 90025-0525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FREEMAN SPOGLI AND CO Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502957
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	27600.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 226 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREYERMUTH, CLIFFORD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2240 E NICOLET AVENUE
 City PHOENIX State AZ Zip Code 85020-5630
 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 ▼ 400.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11A.504970
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. FREYERMUTH, CLIFFORD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2240 E NICOLET AVENUE
 City PHOENIX State AZ Zip Code 85020-5630
 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 ▼ 400.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511261
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. FROST, HOLLOWAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 667
 City HOUSTON State TX Zip Code 77001-0667
 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 ▼ 25000.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506053
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5400.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 227 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FROST, HOLLOWAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 667
 City HOUSTON State TX Zip Code 77001-0667
 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 ▼ 25000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512950
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. FRY, STEPHEN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 EAST VERMONT ST.
 City INDIANAPOLIS State IN Zip Code 46202-3637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508960
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. FUENTES, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 9TH ST NW STE 750 SUITE 750
 City WASHINGTON State DC Zip Code 20001-4589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTPORT STRATEGIES LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511812
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10000.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 228 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUNK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 752 WOODLAND DR.,
 City SANTA BARBARA State CA Zip Code 93108-1840
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503401
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FUNK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 752 WOODLAND DR.,
 City SANTA BARBARA State CA Zip Code 93108-1840
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506861
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FUNK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 752 WOODLAND DR.,
 City SANTA BARBARA State CA Zip Code 93108-1840
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512650
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**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 229 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALE, STAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 MADISON
 City NEW YORK State NY Zip Code 10022-3213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GALE INTERNATIONAL Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 12 / 2017
Transaction ID : SA11A.509956
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GALLAGHER, SHERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 E 405 N
 City KANAB State UT Zip Code 84741-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINGATE WILDERNESS THERAPY Occupation (for Individual) WILDERNESS SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507184
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GALLAGHER, SHERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 E 405 N
 City KANAB State UT Zip Code 84741-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINGATE WILDERNESS THERAPY Occupation (for Individual) WILDERNESS SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513614
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**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 230 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLOWAY, TIMOTHY, EVAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 609
 City NEENAH State WI Zip Code 54957-0609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GALLOWAY COMPANY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2017
Transaction ID : SA11A.509455
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

B. GANZI, PATRICIA, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 E 56TH ST FL14
 City NEW YORK State NY Zip Code 10022-3077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502974
 Amount of Each Receipt this Period 75000.00
 Memo Item
 CONTRIBUTION

C. GANZI, VICTOR, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 E 56TH ST FL 14
 City NEW YORK State NY Zip Code 10022-3077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502956
 Amount of Each Receipt this Period 75000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	151000.00
TOTAL This Period (last page this line number only).....	

**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 231 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. GARCIA, GUILLERMO, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9401 SW 103 STREET
 City MIAMI State FL Zip Code 33176-3057
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11A.500720
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GARCIA, GUILLERMO, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9401 SW 103 STREET
 City MIAMI State FL Zip Code 33176-3057
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503840
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GARCIA, GUILLERMO, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9401 SW 103 STREET
 City MIAMI State FL Zip Code 33176-3057
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11A.508101
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 232 OF 1054
	<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	

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)
Team Ryan

A. GARCIA, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 818 E. 3RD ST.

City STOCKTON	State CA	Zip Code 95206-1640
------------------	-------------	------------------------

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 ▼
311.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2017

Transaction ID : SA11A.501181

Amount of Each Receipt this Period
15.98

Memo Item
CONTRIBUTION

B. GARCIA, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 818 E. 3RD ST.

City STOCKTON	State CA	Zip Code 95206-1640
------------------	-------------	------------------------

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 ▼
311.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2017

Transaction ID : SA11A.501182

Amount of Each Receipt this Period
15.98

Memo Item
CONTRIBUTION

C. GARCIA, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 818 E. 3RD ST.

City STOCKTON	State CA	Zip Code 95206-1640
------------------	-------------	------------------------

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 ▼
311.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11A.501247

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	56.96
TOTAL This Period (last page this line number only).....	

**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 233 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST.
 City STOCKTON State CA Zip Code 95206-1640
 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 ▼ 311.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2017
Transaction ID : SA11A.502436
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST.
 City STOCKTON State CA Zip Code 95206-1640
 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 ▼ 311.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2017
Transaction ID : SA11A.502497
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST.
 City STOCKTON State CA Zip Code 95206-1640
 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 ▼ 311.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11A.503282
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**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 234 OF 1054
	<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)
Team Ryan

A. GARCIA, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 818 E. 3RD ST.

City STOCKTON	State CA	Zip Code 95206-1640
------------------	-------------	------------------------

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 ▼
311.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2017

Transaction ID : SA11A.504273

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GARCIA, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 818 E. 3RD ST.

City STOCKTON	State CA	Zip Code 95206-1640
------------------	-------------	------------------------

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 ▼
311.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2017

Transaction ID : SA11A.505746

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GARCIA, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 818 E. 3RD ST.

City STOCKTON	State CA	Zip Code 95206-1640
------------------	-------------	------------------------

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 ▼
311.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017

Transaction ID : SA11A.507343

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**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 235 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST.
 City STOCKTON State CA Zip Code 95206-1640
 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 ▼ 311.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017
Transaction ID : SA11A.507344
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

B. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST.
 City STOCKTON State CA Zip Code 95206-1640
 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 ▼ 311.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2017
Transaction ID : SA11A.508363
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

C. GARDNER, VANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 HARVEY COURT
 City IRVINE State CA Zip Code 92617-4033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEDICAL RESEARCH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2017
Transaction ID : SA11A.502742
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**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 236 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARDNER, VANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 HARVEY COURT
 City IRVINE State CA Zip Code 92617-4033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEDICAL RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505948
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GARDNER, VANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 HARVEY COURT
 City IRVINE State CA Zip Code 92617-4033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEDICAL RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511708
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GARWOOD, CA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9618 ROCKHUST DRIVE
 City HOUSTON State TX Zip Code 77080-1202
 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 ▼ 210.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502887
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**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 237 OF 1054
	<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)
Team Ryan

A. GARWOOD, CA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9618 ROCKHUST DRIVE
 City HOUSTON State TX Zip Code 77080-1202
 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2017
Transaction ID : SA11A.506333
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. GARWOOD, CA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9618 ROCKHUST DRIVE
 City HOUSTON State TX Zip Code 77080-1202
 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : SA11A.512247
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. GASBARRS, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ORCHARD LANE
 City GOLF State IL Zip Code 60029-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTE INTERNATIONAL TAX Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.503242
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 238 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GASBARRS, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ORCHARD LANE
 City GOLF State IL Zip Code 60029-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTE INTERNATIONAL TAX Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 25 / 2017
Transaction ID : SA11A.506697
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GASBARRS, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ORCHARD LANE
 City GOLF State IL Zip Code 60029-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTE INTERNATIONAL TAX Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 25 / 2017
Transaction ID : SA11A.512681
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GATES, THOMAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 N SHORELINE STE 1101
 City CORPUS CHRISTI State TX Zip Code 78401-0356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL & GAS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 159000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502959
 Amount of Each Receipt this Period 134000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 134100.00
TOTAL This Period (last page this line number only)..... ▶

**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 239 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAUF, BERNARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2542 BABCOCK RD
 City VIENNA State VA Zip Code 22181-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INNOVATIVE DEFENSE TECHNOLOGIES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2017
Transaction ID : SA11A.501628
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

B. GAVIN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 VISTA CT
 City VERO BEACH State FL Zip Code 32962-0749
 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 ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.503274
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

C. GAVIN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 VISTA CT
 City VERO BEACH State FL Zip Code 32962-0749
 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 ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2017
Transaction ID : SA11A.506719
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10110.00
TOTAL This Period (last page this line number only).....	

**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 240 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAVIN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 VISTA CT
 City VERO BEACH State FL Zip Code 32962-0749
 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 ▼ 330.00

Date of Receipt 06 / 25 / 2017
Transaction ID : SA11A.512694
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

B. GAYNOR, GEORGE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LAKESHORE DR.
 City CHICAGO State IL Zip Code 60610-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 02 / 2017
Transaction ID : SA11A.504175
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GAYNOR, GEORGE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LAKESHORE DR.
 City CHICAGO State IL Zip Code 60610-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11A.508092
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00
TOTAL This Period (last page this line number only)..... ▶

**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 241 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEARHARDT, MICHAEL, I., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4471 SOUTHERN BLVD
 City DAYTON State OH Zip Code 45429-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JBK MANUFACTURING & DISTRIBUTION Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505697
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GEERNAERT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 PALOS VERDES DR. W
 City PALOS VERDES ESTAT State CA Zip Code 90274-1215
 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 ▼ 450.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11A.501080
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GEERNAERT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 PALOS VERDES DR. W
 City PALOS VERDES ESTAT State CA Zip Code 90274-1215
 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 ▼ 450.00

Date of Receipt 04 / 06 / 2017
Transaction ID : SA11A.501164
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**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 242 OF 1054		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEERNAERT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 PALOS VERDES DR. W
 City PALOS VERDES ESTAT State CA Zip Code 90274-1215
 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 ▼ 450.00

Date of Receipt **05 / 03 / 2017**
Transaction ID : SA11A.504223
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 TO BE CHARGED BACK

B. GEERNAERT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 PALOS VERDES DR. W
 City PALOS VERDES ESTAT State CA Zip Code 90274-1215
 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 ▼ 450.00

Date of Receipt **05 / 06 / 2017**
Transaction ID : SA11A.505320
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 TO BE CHARGED BACK

C. GEERNAERT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 PALOS VERDES DR. W
 City PALOS VERDES ESTAT State CA Zip Code 90274-1215
 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 ▼ 450.00

Date of Receipt **06 / 03 / 2017**
Transaction ID : SA11A.508795
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 TO BE CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 243 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEERNAERT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 PALOS VERDES DR. W
 City PALOS VERDES ESTAT State CA Zip Code 90274-1215
 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 ▼ 450.00

Date of Receipt 06 / 06 / 2017
Transaction ID : SA11A.509312
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 TO BE CHARGED BACK

B. GELIEBTER, MELVIN, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10990 WILSHIRE BLVD 8TH FLOOR
 City LOS ANGELES State CA Zip Code 90024-3918
 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 ▼ 25000.00

Date of Receipt 04 / 18 / 2017
Transaction ID : SA11A.502282
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. GELNER, BRIAN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5301 S WHITMORE AVENUE
 City SPRINGFIELD State MO Zip Code 65810-2583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEART OF AMERICA BEVERAGES Occupation (for Individual) DISTRIBUTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510633
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 26550.00
TOTAL This Period (last page this line number only)..... ▶

**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 244 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GENIRS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 ROYAL MARCO WAY
 634
 City MARCO ISLAND State FL Zip Code 34145-1896
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502338
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GENIRS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 ROYAL MARCO WAY
 634
 City MARCO ISLAND State FL Zip Code 34145-1896
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11A.505824
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GENIRS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 ROYAL MARCO WAY
 634
 City MARCO ISLAND State FL Zip Code 34145-1896
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2017
Transaction ID : SA11A.511780
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 245 OF 1054
	<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)
Team Ryan

A. GENSLER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23115 W. Q ROAD

City ELKHORN	State NE	Zip Code 68022-3120
-----------------	-------------	------------------------

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 ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2017

Transaction ID : SA11A.508037

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. GENSLER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23115 W. Q ROAD

City ELKHORN	State NE	Zip Code 68022-3120
-----------------	-------------	------------------------

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 ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2017

Transaction ID : SA11A.511958

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GEORGE, RICHARD, N., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 SINCLAIR DRIVE, APT 218

City PITTSFORD	State NY	Zip Code 14534-1737
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

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
04		03		2017

Transaction ID : SA11A.500472

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**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 246 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GETTLER, DELIAAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 FILSON PL APT 4
 City CINCINNATI State OH Zip Code 45202-1600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRUSTHOUSE, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504328
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. GHAZALI, SHAZIA, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10933 CARNOUSTIE LANE
 City FT. WAYNE State IN Zip Code 46814-9320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506600
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GHISELLI, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 MONTEGO BAY DR.
 City EL PASO State TX Zip Code 79912-4411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503942
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**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 247 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GHISELLI, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 MONTEGO BAY DR.
 City EL PASO State TX Zip Code 79912-4411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 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
 05 / 30 / 2017
Transaction ID : SA11A.507287
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GHISELLI, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 MONTEGO BAY DR.
 City EL PASO State TX Zip Code 79912-4411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 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
 06 / 30 / 2017
Transaction ID : SA11A.513684
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GIAMBRONE, VICKI, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1199 PICKETT RIDGE CT
 City BEAVERCREEK State OH Zip Code 45434-7084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBD ADVISORS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.505696
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**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 248 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIBLIN, CHRISTOPHER, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 CHANCEL PLACE
 City ALEXANDRIA State VA Zip Code 22314-4707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OGILVY Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504318
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. GIDWITZ, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 S WACKER DR STE 4000
 City CHICAGO State IL Zip Code 60606-5821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GCG PARTNERS Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504753
 Amount of Each Receipt this Period 17500.00
 Memo Item CONTRIBUTION

C. GIDWITZ, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 S WACKER DR STE 4000
 City CHICAGO State IL Zip Code 60606-5821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GCG PARTNERS Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504754
 Amount of Each Receipt this Period 17500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45000.00
TOTAL This Period (last page this line number only).....	

**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 249 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIELOW, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12629 OAK GROVE DRIVE
 City HUNTLEY State IL Zip Code 60142-7449
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11A.500735
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GIELOW, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12629 OAK GROVE DRIVE
 City HUNTLEY State IL Zip Code 60142-7449
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503853
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GIESECKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 36
 City MARBLE FALLS State TX Zip Code 78654-0036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 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
 04 / 26 / 2017
Transaction ID : SA11A.503424
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**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 250 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIESECKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 36
 City MARBLE FALLS State TX Zip Code 78654-0036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 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
 05 / 26 / 2017
Transaction ID : SA11A.506870
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GIESECKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 36
 City MARBLE FALLS State TX Zip Code 78654-0036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 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
 06 / 26 / 2017
Transaction ID : SA11A.512661
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GIRAUD, CHARLES, WILLIAM, MR., IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 ASHLIN DR.
 City MIDLAND State TX Zip Code 79705-8701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508950
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

**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 251 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIRLING, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 872 ROBIN HOOD DRIVE
 City ALLENTOWN State PA Zip Code 18103-2937
 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 ▼ 2500.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11A.502915
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. GLEASON, GEORGE, G., MR., II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8811
 City LITTLE ROCK State AR Zip Code 72231-8811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANK OF THE OZARKS Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 04 / 14 / 2017
Transaction ID : SA11A.501632
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. GLEASON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4716 S 190 STREET
 City OMAHA State NE Zip Code 68135-3585
 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 ▼ 300.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503759
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5250.00
TOTAL This Period (last page this line number only).....▶	

**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 252 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLEASON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4716 S 190 STREET
 City OMAHA State NE Zip Code 68135-3585
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017
Transaction ID : SA11A.507445
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GLEASON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4716 S 190 STREET
 City OMAHA State NE Zip Code 68135-3585
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2017
Transaction ID : SA11A.513197
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GLEASON, LINDA, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8811
 City LITTLE ROCK State AR Zip Code 72231-8811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANK OF THE OZARKS Occupation (for Individual) BANK DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2017
Transaction ID : SA11A.501633
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2800.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 253 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLOVER, JULEANNA, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12809 GREAT OAK LANE
 City CLIFTON State VA Zip Code 20124-1529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2017
Transaction ID : SA11A.500950
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. GOELZER, DANIEL, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5941 SEARL TER
 City BETHESDA State MD Zip Code 20816-2022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAKER & MCKENZIE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503667
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. GOLDMACHER, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 E 72ND ST
 City NEW YORK State NY Zip Code 10021-4245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEWMARK GRUBB KNIGHT FRANK Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506093
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 11500.00
TOTAL This Period (last page this line number only)..... ▶

**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 254 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. GOLDRICH, LAWRNCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6474 COLLEGE PARK SQ.
 SUTE 306
 City VIRGINIA BEACH State VA Zip Code 23464-3609
 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 ▼ 1000.00

Date of Receipt **04 / 26 / 2017**
Transaction ID : SA11A.503418
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GOMEZ, NARDE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ROYAL PALM DRIVE
 City FORT LAUDERDALE State FL Zip Code 33301-1408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 20 / 2017**
Transaction ID : SA11A.511427
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GOODNIGHT, JAMES, H., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 APPLETREE LANE
 City CARY State NC Zip Code 27513-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504664
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50450.00
TOTAL This Period (last page this line number only).....	

**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 255 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORDON, BYFIELD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SANTA ANA AVENUE SE
 City ALBUQUERQUE State NM Zip Code 87123-4234
 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 ▼ 400.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503973
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GORMAN, GARY, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 N MAIN STREET
 City OREGON State WI Zip Code 53575-1447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GORMAN & CO Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504702
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GOSHEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2413 COUNTRYSIDE DRIVE
 City SILVER SPRING State MD Zip Code 20905-4524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US NRC Occupation (for Individual) US NRC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503753
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 256 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOSHEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2413 COUNTRYSIDE DRIVE
 City SILVER SPRING State MD Zip Code 20905-4524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US NRC Occupation (for Individual) US NRC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507482
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GOSHEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2413 COUNTRYSIDE DRIVE
 City SILVER SPRING State MD Zip Code 20905-4524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US NRC Occupation (for Individual) US NRC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513225
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GOTTSACKER, SUSAN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3313 SKYLINE BOULEVARD
 City RENO State NV Zip Code 89509-5658
 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 ▼ 300.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511423
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 257 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. GRABER, DON, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 INVERNESS DRIVE

City BLUFFTON	State SC	Zip Code 29910-4962
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11A.505695

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. GRADDY, DARRELL, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12321 MALLARD BAY DR

City KNOXVILLE	State TN	Zip Code 37922-9364
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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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
06		07		2017

Transaction ID : SA11A.508854

Amount of Each Receipt this Period
1250.00

Memo Item
CONTRIBUTION

C. GRADEL, ADDISON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8613 FLINT AVENUE

City LUBBOCK	State TX	Zip Code 79423-3013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PSYCHOLOGY DOCTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : SA11A.503915

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3350.00
TOTAL This Period (last page this line number only).....	

**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 258 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRADEL, ADDISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8613 FLINT AVENUE
 City LUBBOCK State TX Zip Code 79423-3013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHOLOGY DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507285
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRAINGER, DAVID, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 PEMBRIDGE DRIVE
 City LAKE FOREST State IL Zip Code 60045-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WW GRAINGER Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505859
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. GREEHEY, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 780489
 City SAN ANTONIO State TX Zip Code 78278-0489
 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 ▼ 93700.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512291
 Amount of Each Receipt this Period 93700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	96300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 259 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENWOOD, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7510 GUM PUCKETT RD
 City MURFREESBORO State TN Zip Code 37127-8800
 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 ▼ 240.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503755
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. GREENWOOD, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7510 GUM PUCKETT RD
 City MURFREESBORO State TN Zip Code 37127-8800
 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 ▼ 240.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507444
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

C. GREENWOOD, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7510 GUM PUCKETT RD
 City MURFREESBORO State TN Zip Code 37127-8800
 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 ▼ 240.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513185
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 260 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5833 SCENIC AVE
 City FIRESTONE State CO Zip Code 80504-5652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WK REAL ESTATE Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11A.500672
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GREEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5833 SCENIC AVE
 City FIRESTONE State CO Zip Code 80504-5652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WK REAL ESTATE Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2017
Transaction ID : SA11A.502847
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GREEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5833 SCENIC AVE
 City FIRESTONE State CO Zip Code 80504-5652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WK REAL ESTATE Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2017
Transaction ID : SA11A.506303
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**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 261 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5833 SCENIC AVE
 City FIRESTONE State CO Zip Code 80504-5652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WK REAL ESTATE Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : SA11A.512220
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GREENFIELD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 876 CENTRAL AVE
 City WOODMERE State NY Zip Code 11598-2147
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.504007
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GREENFIELD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 876 CENTRAL AVE
 City WOODMERE State NY Zip Code 11598-2147
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507257
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 262 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. GREENFIELD, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 876 CENTRAL AVE

City WOODMERE	State NY	Zip Code 11598-2147
------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11A.513605

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GREENWOOD, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1087 STATE HIGHWAY 310

City CANTON	State NY	Zip Code 13617-3378
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DAIRY FARMER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2017

Transaction ID : SA11A.505049

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. GREEN, W, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 EAST CLUB DRIVE

City CARROLLTON	State GA	Zip Code 30117-4142
--------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11A.501244

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

**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 263 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 EAST CLUB DRIVE
 City CARROLLTON State GA Zip Code 30117-4142
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2017
Transaction ID : SA11A.501528
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GREEN, W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 EAST CLUB DRIVE
 City CARROLLTON State GA Zip Code 30117-4142
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2017
Transaction ID : SA11A.502465
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GREEN, W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 EAST CLUB DRIVE
 City CARROLLTON State GA Zip Code 30117-4142
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2017
Transaction ID : SA11A.504074
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**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 264 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREHAN, JULIA, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 DILSTON LANE
 City MOBILE State AL Zip Code 36608-2019
 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 ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2017
Transaction ID : SA11A.504880
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

B. GRETZ, MICHAEL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 WELWYN RD
 City WAYNE State PA Zip Code 19087-3840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRETZ BEER CO. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506057
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. GRIEN, JAMES, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 THE PRADO NE #6
 City ATLANTA State GA Zip Code 30309-3367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TM CAPITAL Occupation (for Individual) INVESTMENT BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2017
Transaction ID : SA11A.504190
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
TOTAL This Period (last page this line number only).....▶	

**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 265 OF 1054
	<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)
Team Ryan

A. GRIFFITH, CURTIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 5060**

City LUBBOCK	State TX	Zip Code 79408-5060
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CITY BANK	Occupation (for Individual) BANKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 24 / 2017

Transaction ID : SA11A.506098

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. GRIFFIN, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 10128**

City LUBBOCK	State TX	Zip Code 79408-3128
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GRIFFIN COMPANIES	Occupation (for Individual) PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 16 / 2017

Transaction ID : SA11A.504784

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. GRIFFITH, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9 FAWN RIDGE CT**

City REISTERSTOWN	State MD	Zip Code 21136-5654
-----------------------------	--------------------	-------------------------------

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 ▼
250.00

Date of Receipt
04 / 22 / 2017

Transaction ID : SA11A.503121

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10050.00
TOTAL This Period (last page this line number only).....	

**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 266 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFITH, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 FAWN RIDGE CT
 City REISTERSTOWN State MD Zip Code 21136-5654
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506270
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GRIJA, LUCIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2945 BECKET AVENUE
 City WESTCHESTER State IL Zip Code 60154-5620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11A.500744
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. GRIJA, LUCIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2945 BECKET AVENUE
 City WESTCHESTER State IL Zip Code 60154-5620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2017
Transaction ID : SA11A.502725
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**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 267 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIJA, LUCIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2945 BECKET AVENUE
 City WESTCHESTER State IL Zip Code 60154-5620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 05 / 01 / 2017
Transaction ID : SA11A.503861
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. GRIJA, LUCIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2945 BECKET AVENUE
 City WESTCHESTER State IL Zip Code 60154-5620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505959
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GRIJA, LUCIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2945 BECKET AVENUE
 City WESTCHESTER State IL Zip Code 60154-5620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11A.508114
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**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 268 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIJA, LUCIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2945 BECKET AVENUE
 City WESTCHESTER State IL Zip Code 60154-5620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511714
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GROSFELD, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 MARTELL DR
 City BLOOMFIELD HILLS State MI Zip Code 48304-3452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512067
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. GROSS, DIETRICH, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 769 MICHIGAN AVENUE
 City WILMETTE State IL Zip Code 60091-1956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JUPITER ALUMINUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 52500.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.501958
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5225.00
TOTAL This Period (last page this line number only).....▶	

**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 269 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROSS, WALTER, L., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 559 S FORBS ROAD
 City LEXINGTON State KY Zip Code 40504-1149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEPSI COLA BOTTLERS INC Occupation (for Individual) SR. VP GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505077
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GROVES, HELEN, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 N SAINT MARYS STREET SUITE 1200
 City SAN ANTONIO State TX Zip Code 78205-3510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508976
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GUERIN, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17002 GRANT ST.
 City OMAHA State NE Zip Code 68116-2665
 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 ▼ 250.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503407
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 270 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. GUERIN, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17002 GRANT ST.
 City OMAHA State NE Zip Code 68116-2665
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506836
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GULLQUIST, HERBERT, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 530 COCONUT PALM ROAD
 City VERO BEACH State FL Zip Code 32963-3711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506052
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. GUNDLUCH, TIMOTHY, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W63N220 FAIRFIELD ST
 City CEDARBURG State WI Zip Code 53012-2700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AURORA HEALTH CARE Occupation (for Individual) ANESTHESIOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.504856
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	26050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 271 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. GUPTILL, WILLIAM, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2573 SAN ANDRES WAY

City CLAREMONT	State CA	Zip Code 91711-1555
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11A.506884

Amount of Each Receipt this Period
750.00

Memo Item CONTRIBUTION

B. HA, ANDREW, K., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 623 BETTY ROSE AVENUE

City GIBBSTOWN	State NJ	Zip Code 08027-1431
-------------------	-------------	------------------------

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 ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2017

Transaction ID : SA11A.500493

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. HA, ANDREW, K., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 623 BETTY ROSE AVENUE

City GIBBSTOWN	State NJ	Zip Code 08027-1431
-------------------	-------------	------------------------

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 ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		17		2017

Transaction ID : SA11A.501999

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**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 272 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., DR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

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 ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2017

Transaction ID : SA11A.504458

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., DR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

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 ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2017

Transaction ID : SA11A.505389

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., DR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

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 ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2017

Transaction ID : SA11A.507638

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**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 273 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HA, ANDREW, K., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 BETTY ROSE AVENUE
 City GIBBSTOWN State NJ Zip Code 08027-1431
 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 ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017
Transaction ID : SA11A.507639
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HA, ANDREW, K., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 BETTY ROSE AVENUE
 City GIBBSTOWN State NJ Zip Code 08027-1431
 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 ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2017
Transaction ID : SA11A.510574
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HAAS, JEANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 125
 City BEAR CREEK State PA Zip Code 18602-0125
 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 ▼ 3525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : SA11A.502529
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**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 274 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAAS, JEANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 125
 City BEAR CREEK State PA Zip Code 18602-0125
 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 ▼ 3525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11A.503085
 Amount of Each Receipt this Period
 700.00
 Memo Item
 CONTRIBUTION

B. HAAS, JEANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 125
 City BEAR CREEK State PA Zip Code 18602-0125
 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 ▼ 3525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506517
 Amount of Each Receipt this Period
 700.00
 Memo Item
 CONTRIBUTION

C. HAAS, JEANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 125
 City BEAR CREEK State PA Zip Code 18602-0125
 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 ▼ 3525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2017
Transaction ID : SA11A.512726
 Amount of Each Receipt this Period
 700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**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 275 OF 1054
	<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)
Team Ryan

A. HABIB, SAJJAD, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11035 W SYCAMORE HILLS DR
 City FT. WAYNE State IN Zip Code 46814-9310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 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
 05 / 26 / 2017
Transaction ID : SA11A.506606
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HADFIELD , DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5571 65TH AVE N
 City PINELLAS PARK State FL Zip Code 33781-5529
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2017
Transaction ID : SA11A.501277
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HADFIELD , DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5571 65TH AVE N
 City PINELLAS PARK State FL Zip Code 33781-5529
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2017
Transaction ID : SA11A.501536
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 276 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. HADFIELD , DAVID , , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5571 65TH AVE N

City PINELLAS PARK	State FL	Zip Code 33781-5529
-----------------------	-------------	------------------------

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 ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11A.505275

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HADFIELD , DAVID , , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5571 65TH AVE N

City PINELLAS PARK	State FL	Zip Code 33781-5529
-----------------------	-------------	------------------------

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 ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2017

Transaction ID : SA11A.505282

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HADFIELD , DAVID , , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5571 65TH AVE N

City PINELLAS PARK	State FL	Zip Code 33781-5529
-----------------------	-------------	------------------------

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 ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11A.509346

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 277 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HADFIELD, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5571 65TH AVE N

City PINELLAS PARK	State FL	Zip Code 33781-5529
-----------------------	-------------	------------------------

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 ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2017

Transaction ID : SA11A.509502

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HAGERMAN, MARK, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 10690

City FORT WAYNE	State IN	Zip Code 46853-0690
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE HAGERMAN GROUP	Occupation (for Individual) DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504694

Amount of Each Receipt this Period
4000.00

Memo Item CONTRIBUTION

C. HAHN, JAMES, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 MAPLEWOOD DR.

City BREWSTER	State NY	Zip Code 10509-5003
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEER
--	---

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
04		16		2017

Transaction ID : SA11A.502388

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4125.00
TOTAL This Period (last page this line number only).....	

**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 278 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAHN, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 MAPLEWOOD DR.
 City BREWSTER State NY Zip Code 10509-5003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 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
 05 / 16 / 2017
Transaction ID : SA11A.505593
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HAHN, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 MAPLEWOOD DR.
 City BREWSTER State NY Zip Code 10509-5003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 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
 06 / 16 / 2017
Transaction ID : SA11A.511151
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HALEY, JANE, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 MCDONOUGH ST
 City DAYTON State OH Zip Code 45402-2246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOSIGER Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.505682
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10200.00
TOTAL This Period (last page this line number only).....▶	

**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 279 OF 1054
	<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)
Team Ryan

A. HALL, DAVIDSON, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 ARMISTEAD RD

City LITTLE ROCK	State AR	Zip Code 72207-5428
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

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
06		02		2017

Transaction ID : SA11A.507889

Amount of Each Receipt this Period
1250.00

Memo Item CONTRIBUTION

B. HALL, KEITH, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11365 BEECHER CIRCLE EAST

City JACKSONVILLE	State FL	Zip Code 32223-7944
----------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2017

Transaction ID : SA11A.506379

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HALL, KEITH, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11365 BEECHER CIRCLE EAST

City JACKSONVILLE	State FL	Zip Code 32223-7944
----------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2017

Transaction ID : SA11A.506380

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

**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 280 OF 1054
	<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)
Team Ryan

A. HALL, KEITH, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11365 BEECHER CIRCLE EAST

City JACKSONVILLE	State FL	Zip Code 32223-7944
----------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.513252

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HALL, VERNON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4752 WESTBRIDGE DRIVE
211

City OCEANSIDE	State CA	Zip Code 92056-3031
-------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2017

Transaction ID : SA11A.503245

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HALL, VERNON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4752 WESTBRIDGE DRIVE
211

City OCEANSIDE	State CA	Zip Code 92056-3031
-------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2017

Transaction ID : SA11A.506713

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 281 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4752 WESTBRIDGE DRIVE
 211
 City OCEANSIDE State CA Zip Code 92056-3031
 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 ▼ 300.00

Date of Receipt 06 / 25 / 2017
Transaction ID : SA11A.512693
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HALLAM, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5330 S DENTWOOD DR
 City DALLAS State TX Zip Code 75220-2200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEN E KEINT CO. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512952
 Amount of Each Receipt this Period 3000.00
 Memo Item CONTRIBUTION

C. HALLAM, JAMES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1805 RECORD XING
 City DALLAS State TX Zip Code 75235-6220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEN E. KEITH BEVERAGE Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512964
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4050.00
TOTAL This Period (last page this line number only)..... ▶

**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 282 OF 1054
	<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)
Team Ryan

A. HALLAM, JOHN, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4204 EDMONDSON AVE

City DALLAS	State TX	Zip Code 75205-2702
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BEN E KEITH CO	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.512956

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. HALLADAY, REED, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23449 OAKRUN LANE

City NEWHALL	State CA	Zip Code 91321-3450
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BEL AIR INVESTMENT ADVISORS LLC.	Occupation (for Individual) SENIOR MANAGING DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
17500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2017

Transaction ID : SA11A.502964

Amount of Each Receipt this Period
17500.00

Memo Item
CONTRIBUTION

C. HALLAM, ROBERT, G., , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1805 RECORD CROSSING

City DALLAS	State TX	Zip Code 75235-6220
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BEN E. KEITH COMPANY	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.512955

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	21500.00
TOTAL This Period (last page this line number only).....	

**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 283 OF 1054
	<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)
Team Ryan

A. HALLAM, ROBERT, G., , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1805 RECORD CROSSING

City DALLAS	State TX	Zip Code 75235-6220
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BEN E. KEITH COMPANY	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.512968

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. HALLORAN, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 WISTAR ROAD

City VILLANOVA	State PA	Zip Code 19085-1512
-------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : SA11A.504980

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HAMM, HAROLD, G., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1295

City OKLAHOMA CITY	State OK	Zip Code 73101-1295
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONTINENTAL RESOURCES	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11A.508932

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 284 OF 1054
(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)
Team Ryan

A. HAMM, HAROLD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1295
 City OKLAHOMA CITY State OK Zip Code 73101-1295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL RESOURCES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508933
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. HAMPTON, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 NESTING WAY
 City WARNER ROBINS State GA Zip Code 31093-4100
 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 ▼ 230.00

Date of Receipt 04 / 11 / 2017
Transaction ID : SA11A.501508
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAMPTON, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 NESTING WAY
 City WARNER ROBINS State GA Zip Code 31093-4100
 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 ▼ 230.00

Date of Receipt 04 / 11 / 2017
Transaction ID : SA11A.501509
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2550.00
TOTAL This Period (last page this line number only).....▶

**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 285 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMPTON, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 NESTING WAY

City WARNER ROBINS	State GA	Zip Code 31093-4100
-----------------------	-------------	------------------------

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 ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2017

Transaction ID : SA11A.502437

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HAMPTON, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 NESTING WAY

City WARNER ROBINS	State GA	Zip Code 31093-4100
-----------------------	-------------	------------------------

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 ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : SA11A.503279

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HAMPTON, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 NESTING WAY

City WARNER ROBINS	State GA	Zip Code 31093-4100
-----------------------	-------------	------------------------

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 ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : SA11A.503888

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**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 286 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMPTON, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 NESTING WAY
 City WARNER ROBINS State GA Zip Code 31093-4100
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506429
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HAMPTON, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 NESTING WAY
 City WARNER ROBINS State GA Zip Code 31093-4100
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.513330
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HANCE, KENT, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W. 15TH SUITE 950
 City AUSTIN State TX Zip Code 78701-1696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HANCE SCARBOROUGH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.510629
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5075.00
TOTAL This Period (last page this line number only).....	

**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 287 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAND, MARVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 246
 City CROSS HILL State SC Zip Code 29332-0246
 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 ▼ 1000.00

Date of Receipt 06 / 15 / 2017
Transaction ID : SA11A.510508
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HAND, RAYMOND, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 RADFORD PLACE
 City KNOXVILLE State TN Zip Code 37917-4936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AB WHOLESALER Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508939
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. HANNAH, BILL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 WILLOW CREEK CV
 City CONWAY State AR Zip Code 72034-7565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NABHOLZ CONSTRUCTION Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504334
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 288 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANNA, FRANK, J., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 CONCOURSE PKWY STE 200
 City ATLANTA State GA Zip Code 30328-6157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HANNA CAPITAL Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507909
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. HANSBERGER, JAMES, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1416 GARMON FERRY RD NW
 City ATLANTA State GA Zip Code 30327-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORGAN STANLEY Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504332
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. HARDER, JD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 SOUTH LAKESHORE DRIVE
 City RANSOM CANYON State TX Zip Code 79366-2405
 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 ▼ 300.00

Date of Receipt 04 / 19 / 2017
Transaction ID : SA11A.502723
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 27550.00
TOTAL This Period (last page this line number only)..... ▶

**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 289 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARDER, JD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 SOUTH LAKESHORE DRIVE
 City RANSOM CANYON State TX Zip Code 79366-2405
 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 ▼ 300.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505938
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HARDER, JD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 SOUTH LAKESHORE DRIVE
 City RANSOM CANYON State TX Zip Code 79366-2405
 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 ▼ 300.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511703
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HARLOW, BRYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1812 SOLITAIRE LANE
 City MC LEAN State VA Zip Code 22101-4200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARLOW GOVERNMENT RELATIONS Occupation (for Individual) PRESIDENT AND MANAGING PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.501956
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

**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 290 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARPER, JACK, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2009 WINFIELD RD

City MIDLAND	State TX	Zip Code 79705-8669
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11A.508952

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. HARRINGTON, MICHAEL, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 235 ROYAL OAK CT.

City ZIONSVILLE	State IN	Zip Code 46077-1039
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11A.508959

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. HARTIGAN, STUART, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 444 GRANITE AVE.

City MONROVIA	State CA	Zip Code 91016-2324
------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2017

Transaction ID : SA11A.500685

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7525.00
TOTAL This Period (last page this line number only).....	

**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 291 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTIGAN, STUART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 GRANITE AVE.
 City MONROVIA State CA Zip Code 91016-2324
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502354
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HARTIGAN, STUART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 GRANITE AVE.
 City MONROVIA State CA Zip Code 91016-2324
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503832
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HARTIGAN, STUART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 GRANITE AVE.
 City MONROVIA State CA Zip Code 91016-2324
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11A.505850
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 292 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTIGAN, STUART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 GRANITE AVE.
 City MONROVIA State CA Zip Code 91016-2324
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2017
Transaction ID : SA11A.511794
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HARWELL, WAYNE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17065
 City SAN ANTONIO State TX Zip Code 78217-0065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508971
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. HASLAM, JAMES, A., MR., II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 10146
 City KNOXVILLE State TN Zip Code 37939-0146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PILOT CORPORATION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.510639
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	51025.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 293 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HASLAM, JAMES, A., MR., III			Date of Receipt
Mailing Address PO BOX 10528			<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2017"/>
City KNOXVILLE	State TN	Zip Code 37939-0528	Transaction ID : SA11A.512046
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25000.00"/>
Name of Employer (for Individual) PILOT TRAVEL CENTERS LLC		Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="25000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HASLAM, SUSAN, B., MRS.,			Date of Receipt
Mailing Address PO BOX 10528			<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2017"/>
City KNOXVILLE	State TN	Zip Code 37939-0528	Transaction ID : SA11A.512045
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25000.00"/>
Name of Employer (for Individual) RIVR MEDIA		Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="25000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HASLAM, WILLIAM, E., MR.,			Date of Receipt
Mailing Address 5516 LONAS DR STE 260			<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2017"/>
City KNOXVILLE	State TN	Zip Code 37909-3243	Transaction ID : SA11A.506608
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25000.00"/>
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BES	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="25000.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 294 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HASNAIN, MOHSIN, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3633 HERON PRESERVE TRAIL
 City FT. WAYNE State IN Zip Code 46814-7593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMERGENCY MEDICINE OF INDIANA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506598
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HASSE, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 CANYON RIDGE DRIVE
 City WICHITA FALLS State TX Zip Code 76309-2715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500709
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HASSE, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 CANYON RIDGE DRIVE
 City WICHITA FALLS State TX Zip Code 76309-2715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2017
Transaction ID : SA11A.503833
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**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 295 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAUCK, MEGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 DUDDINGTON PLACE SE
 City WASHINGTON State DC Zip Code 20003-2625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NATHANSON HAUCK Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11A.502897
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMP FIRE GULF WIND, INC. Occupation (for Individual) YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501723
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMP FIRE GULF WIND, INC. Occupation (for Individual) YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 16 / 2017
Transaction ID : SA11A.502582
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2575.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 296 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWS, FRANK, P., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 MCCLUNG AVENUE SE
 City HUNTSVILLE State AL Zip Code 35801-3111
 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 ▼ 400.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512521
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HAWTHORNE, JERROLD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5724 ODESSA STREET
 City BEL AIRE State KS Zip Code 67220-1840
 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 ▼ 325.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503945
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAWTHORNE, JERROLD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5724 ODESSA STREET
 City BEL AIRE State KS Zip Code 67220-1840
 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 ▼ 325.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507290
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**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 297 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWTHORNE, JERROLD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5724 ODESSA STREET
 City BEL AIRE State KS Zip Code 67220-1840
 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 ▼ 325.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511599
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAWTHORNE, JERROLD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5724 ODESSA STREET
 City BEL AIRE State KS Zip Code 67220-1840
 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 ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513676
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAYDEN, AGNES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 PENINSULA DR.
 City TRAVERSE CITY State MI Zip Code 49686-2743
 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 ▼ 250.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.501964
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**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 298 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYDEN, LOIS, L.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2918 E SNOWBERRY LANE
 City SPOKANE State WA Zip Code 99223-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.505448
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HAYDE, MICHAEL, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 EXECUTIVE CIRCLE
 City IRVINE State CA Zip Code 92614-6746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTERN NATIONAL GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502937
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

C. HAYES, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 954
 City CONCORD State NC Zip Code 28026-0954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505690
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6600.00
TOTAL This Period (last page this line number only).....	

**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 299 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYNES, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 40336
 City HOUSTON State TX Zip Code 77240-0336
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.503239
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HAYNES, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 40336
 City HOUSTON State TX Zip Code 77240-0336
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2017
Transaction ID : SA11A.506695
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HEALY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 ADAMS STREET
 City MADISON State WI Zip Code 53711-2147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASCENDANCY ADVISORS Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.504647
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**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 300 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEDRICK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 694 TRAILCREST CT
 City KIRKWOOD State MO Zip Code 63122-2240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTHA'S HANDS Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2017
Transaction ID : SA11A.502880
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HEDRICK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 694 TRAILCREST CT
 City KIRKWOOD State MO Zip Code 63122-2240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTHA'S HANDS Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2017
Transaction ID : SA11A.506330
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HEDRICK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 694 TRAILCREST CT
 City KIRKWOOD State MO Zip Code 63122-2240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTHA'S HANDS Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : SA11A.512243
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 301 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEIKKALA, WAYNE, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10311 SE EVERGREEN HIGHWAY
 City VANCOUVER State WA Zip Code 98664-5359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DGI COMMERCIAL CONSTRUCTION, LLC Occupation (for Individual) SENIOR HOUSING DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11A.504499
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HEISE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W277N2563 ROCKY POINT RD.
 City PEWAUKEE State WI Zip Code 53072-4330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN HOMES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.504024
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HEISE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W277N2563 ROCKY POINT RD.
 City PEWAUKEE State WI Zip Code 53072-4330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN HOMES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11A.508651
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**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 302 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEISE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W277N2563 ROCKY POINT RD.
 City PEWAUKEE State WI Zip Code 53072-4330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN HOMES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513664
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. HELLMANN, RALPH, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3310 OLD DOMINION BLVD
 City ALEXANDRIA State VA Zip Code 22305-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUGAR HELLMANN GROUP Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.508256
 Amount of Each Receipt this Period 2500.00
 Memo Item
 CONTRIBUTION

C. HELMS, ESTELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2046 FAIRWAY HILLS DR.
 City HUNTSVILLE State AL Zip Code 35802-4329
 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 ▼ 300.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503956
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2650.00
TOTAL This Period (last page this line number only).....	

**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 303 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HELMS, ESTELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2046 FAIRWAY HILLS DR.
 City HUNTSVILLE State AL Zip Code 35802-4329
 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 ▼ 300.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507298
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HELMS, ESTELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2046 FAIRWAY HILLS DR.
 City HUNTSVILLE State AL Zip Code 35802-4329
 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 ▼ 300.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513625
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HELSETH, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4825 Highbury Lane
 City MINNETONKA State MN Zip Code 55345-3927
 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 ▼ 400.00

Date of Receipt 04 / 02 / 2017
Transaction ID : SA11A.501091
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**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 304 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENRICHS, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13403 EDGE WOOD LANE
 City HIGHLAND State IL Zip Code 62249-3049
 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 05 / 05 / 2017
Transaction ID : SA11A.504501
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. HENRY, CHARLES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7133 COUNTRY RD 327
 City GARRETT State IN Zip Code 46738-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HENRY ELECTRIC Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.504854
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. HENRY, JAMES, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3525 ANDREWS HWY STE 200
 City MIDLAND State TX Zip Code 79703-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HENRY RESOURCES LLC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504785
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12300.00
TOTAL This Period (last page this line number only).....	

**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 305 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENSON, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 CIRCLE PARK PL
 City CHAPEL HILL State NC Zip Code 27517-8164
 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 ▼ 10000.00

Date of Receipt **04 / 11 / 2017**
Transaction ID : SA11A.501489
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 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 ▼ 600.00

Date of Receipt **04 / 04 / 2017**
Transaction ID : SA11A.501119
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 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 ▼ 600.00

Date of Receipt **04 / 06 / 2017**
Transaction ID : SA11A.501146
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10100.00
TOTAL This Period (last page this line number only).....	

**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 306 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 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 ▼ 600.00

Date of Receipt
 04 / 07 / 2017
Transaction ID : SA11A.501289
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 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 ▼ 600.00

Date of Receipt
 04 / 25 / 2017
Transaction ID : SA11A.503165
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 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 ▼ 600.00

Date of Receipt
 05 / 07 / 2017
Transaction ID : SA11A.505293
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**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 307 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507166
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.509353
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2017
Transaction ID : SA11A.511590
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 308 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRING, DAVID, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 KEITH HILLS RD
 City LILLINGTON State NC Zip Code 27546-9771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TDM FARMS Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506090
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. HERRING, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 KEITH HILLS RD
 City LILLINGTON State NC Zip Code 27546-9771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506091
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. HERTZ, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.B.563
 City SOUTH ORLEANS State MA Zip Code 02662-0563
 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 ▼ 525.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11A.501601
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5030.00
TOTAL This Period (last page this line number only).....	

**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 309 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERTZ, STEVEN, , ,

Mailing Address P.O.B.563

City SOUTH ORLEANS	State MA	Zip Code 02662-0563
-----------------------	-------------	------------------------

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 ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2017

Transaction ID : SA11A.502787

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERTZ, STEVEN, , ,

Mailing Address P.O.B.563

City SOUTH ORLEANS	State MA	Zip Code 02662-0563
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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 ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017

Transaction ID : SA11A.503998

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERTZ, STEVEN, , ,

Mailing Address P.O.B.563

City SOUTH ORLEANS	State MA	Zip Code 02662-0563
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017

Transaction ID : SA11A.505409

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**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 310 OF 1054
	<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)
Team Ryan

A. HERTZ, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O.B.563

City SOUTH ORLEANS	State MA	Zip Code 02662-0563
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2017

Transaction ID : SA11A.506337

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HERTZ, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O.B.563

City SOUTH ORLEANS	State MA	Zip Code 02662-0563
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11A.507253

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. HERTZ, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O.B.563

City SOUTH ORLEANS	State MA	Zip Code 02662-0563
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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 ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.513272

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

**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 311 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERZING, HENRY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1660 N PROSPECT
 UNIT 1009
 City MILWAUKEE State WI Zip Code 53202-6706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERZING UNIVERSITY Occupation (for Individual) CHANCELLOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.504645
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. HICKLE, RANDALL, S., DR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2404 TOPEKA
 City LUBBOCK State TX Zip Code 79407-2333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRACE HEALTH SYSTEM Occupation (for Individual) PRESIDENT AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2017
Transaction ID : SA11A.512057
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. HICKMAN, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008 HERITAGE VIEW CR
 City HILLIARD State OH Zip Code 43026-7614
 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 ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2017
Transaction ID : SA11A.501457
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2400.00
TOTAL This Period (last page this line number only).....	

**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 312 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKMAN, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008 HERITAGE VIEW CR
 City HILLIARD State OH Zip Code 43026-7614
 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 ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : SA11A.505276
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

B. HICKMAN, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008 HERITAGE VIEW CR
 City HILLIARD State OH Zip Code 43026-7614
 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 ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2017
Transaction ID : SA11A.509503
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

C. HILL, FRANK, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 NW 41ST STREET
 City OKLAHOMA CITY State OK Zip Code 73118-7030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCAFEET & TAFT Occupation (for Individual) ATTORNEY
 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
 06 / 16 / 2017
Transaction ID : SA11A.510670
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 313 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. HILLIARD, JACK, P., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 249

City TEMPLE	State TX	Zip Code 76503-0249
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JACK HILLIARD DIST CO INC.	Occupation (for Individual) WHOLESALER
---	---

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
06		02		2017

Transaction ID : SA11A.507921

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. HILLIS, ROBERT, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 951 E WYE LANE

City FOX POINT	State WI	Zip Code 53217-3649
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIRECT SUPPLY, INC.	Occupation (for Individual) PRESIDENT & CEO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504661

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

C. HILLMAN, TATNALL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 504 W BLEEKER STREET

City ASPEN	State CO	Zip Code 81611-1228
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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 ▼
20000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2017

Transaction ID : SA11A.503737

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	43000.00
TOTAL This Period (last page this line number only).....▶	

**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 314 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILLMAN, TATNALL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 W BLEEKER STREET
 City ASPEN State CO Zip Code 81611-1228
 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 ▼ 20000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504816
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. HILLMAN, TATNALL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 W BLEEKER STREET
 City ASPEN State CO Zip Code 81611-1228
 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 ▼ 20000.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507473
 Amount of Each Receipt this Period 3000.00
 Memo Item CONTRIBUTION

C. HIXON, GEORGE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 W LYNWOOD AVENUE
 City SAN ANTONIO State TX Zip Code 78212-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506087
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	18000.00
TOTAL This Period (last page this line number only).....▶	

**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 315 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HODGES, ROY, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 663
 City DUMAS State MS Zip Code 38625-0663
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513144
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. HOGAN, CECIL, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2128 SWINNEA RD.
 City NESBIT State MS Zip Code 38651-9355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SECURITY CONSULTANTS INC. Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502333
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HOGAN, CECIL, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2128 SWINNEA RD.
 City NESBIT State MS Zip Code 38651-9355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SECURITY CONSULTANTS INC. Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11A.505833
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 316 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOGAN, CECIL, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2128 SWINNEA RD.
 City NESBIT State MS Zip Code 38651-9355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SECURITY CONSULTANTS INC. Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2017
Transaction ID : SA11A.511784
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HOLDORF, KARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1819 BERME ROAD
 City KERHONKSON State NY Zip Code 12446-3129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502030
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. HOLLIDAY, JOHN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 N BENSON AVE
 City UPLAND State CA Zip Code 91786-2166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLLIDAY ROCK Occupation (for Individual) OWNER
 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
 04 / 25 / 2017
Transaction ID : SA11A.502949
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25550.00
TOTAL This Period (last page this line number only).....▶	

**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 317 OF 1054
	<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)
Team Ryan

A. HOLLINGSWORTH, JOSEPH, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 ROCKYTOP LANE
City CLINTON State TN Zip Code 37716-4204
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507901
Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. HOLT, NORMAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2104 KARNES DR.
City KELLER State TX Zip Code 76248-8388
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 14 / 2017
Transaction ID : SA11A.501929
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOLT, NORMAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2104 KARNES DR.
City KELLER State TX Zip Code 76248-8388
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 14 / 2017
Transaction ID : SA11A.505722
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**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 318 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLT, NORMAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2104 KARNES DR.
 City KELLER State TX Zip Code 76248-8388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL CONSULTANT
 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
 06 / 14 / 2017
Transaction ID : SA11A.510584
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HOLZBERGER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 PINNACLE PARK
 City FAIRFIELD State OH Zip Code 45014-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVEDA INSTITUTE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11A.502924
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. HOLZBERGER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 PINNACLE PARK
 City FAIRFIELD State OH Zip Code 45014-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVEDA INSTITUTE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : SA11A.504486
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6100.00
TOTAL This Period (last page this line number only).....▶	

**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 319 OF 1054
	<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)
Team Ryan

A. HOLZBERGER, JULIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 PINNACLE PEAK
 City FAIRFIELD State OH Zip Code 45014-8248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVEDA FREDRIC INSTITUTES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504497
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. HOMSTAD, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6825 GRENADIER BOULEVARD, APT 1101
 City NAPLES State FL Zip Code 34108-7254
 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 ▼ 250.00

Date of Receipt 04 / 18 / 2017
Transaction ID : SA11A.502275
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HORHOTA, MARIE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 E 72ND STREET APT B311
 City NEW YORK State NY Zip Code 10021-0379
 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 ▼ 300.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11A.505008
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**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 320 OF 1054
	<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)
Team Ryan

A. HORHOTA, MARIE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 E 72ND STREET APT B311
 City NEW YORK State NY Zip Code 10021-0379
 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 ▼ 300.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511178
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOROWITZ, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27241 LA PAZ RD STE B
 City LAGUNA NIGUEL State CA Zip Code 92677-3636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOROWITZ GROUP Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500945
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. HORRIGAN, GREG, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11165 OLD HARBOUR RD
 City NORTH PALM BEACH State FL Zip Code 33408-3421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELGAN HOLDINGS, INC. Occupation (for Individual) CO-CHAIRMAN OF THE BOARD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.500862
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75100.00
TOTAL This Period (last page this line number only).....	

**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 321 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORSLEY, SYLVIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 166 KINSLEY ST STE 204
STE. 204

City NASHUA State NH Zip Code 03060-3676

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 ▼ 600.00

Date of Receipt 04 / 19 / 2017
Transaction ID : SA11A.502748

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. HORSLEY, SYLVIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 166 KINSLEY ST STE 204
STE. 204

City NASHUA State NH Zip Code 03060-3676

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 ▼ 600.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505977

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. HORSLEY, SYLVIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 166 KINSLEY ST STE 204
STE. 204

City NASHUA State NH Zip Code 03060-3676

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 ▼ 600.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511720

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

**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 322 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORWOOD, STAN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 724
 City STERLING CITY State TX Zip Code 76951-0724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503312
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HORWOOD, STAN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 724
 City STERLING CITY State TX Zip Code 76951-0724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511813
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HOSSA, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2311 JANSSEN AVE
 City CHUCAGO State IL Zip Code 60614-3019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502883
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**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 323 OF 1054
	<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)
Team Ryan

A. HOSSA, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2311 JANSSEN AVE

City CHUCAGO	State IL	Zip Code 60614-3019
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICL	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2017

Transaction ID : SA11A.506297

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HOSSA, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2311 JANSSEN AVE

City CHUCAGO	State IL	Zip Code 60614-3019
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICL	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2017

Transaction ID : SA11A.512210

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HOSSEINI, FOROUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1004 HAMPSTEAD LANE

City ORMOND BEACH	State FL	Zip Code 32174-9284
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICI HOMES	Occupation (for Individual) SR. VP - INFORMATION SYSTEMS
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11A.506263

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

**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 324 OF 1054
	<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)
Team Ryan

A. HOSSEINI, MORI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2379 BEVILLE ROAD

City DAYTONA BEACH	State FL	Zip Code 32119-8720
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2017

Transaction ID : SA11A.505932

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. HOUSE, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1970 VISTA LAKES DRIVE

City FLEMING ISLAND	State FL	Zip Code 32003-7312
------------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2017

Transaction ID : SA11A.503261

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HOUSE, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1970 VISTA LAKES DRIVE

City FLEMING ISLAND	State FL	Zip Code 32003-7312
------------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2017

Transaction ID : SA11A.506705

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10100.00
TOTAL This Period (last page this line number only).....▶	

**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 325 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUSE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 VISTA LAKES DRIVE
 City FLEMING ISLAND State FL Zip Code 32003-7312
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2017
Transaction ID : SA11A.512686
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOUSTON, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1145 GRIMES RD.
 City RICHMOND State IN Zip Code 47374-7374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HMD Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2017
Transaction ID : SA11A.502803
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOUSTON, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1145 GRIMES RD.
 City RICHMOND State IN Zip Code 47374-7374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HMD Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2017
Transaction ID : SA11A.502840
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**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 326 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUSTON, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1145 GRIMES RD.
 City RICHMOND State IN Zip Code 47374-7374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HMD Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 27 / 2017
Transaction ID : SA11A.503561
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. HOWALT, CYNTHIA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 KYLE LN
 City DALTON State GA Zip Code 30720-3726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXTILE RUBBER & CHEMICAL CO. Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504804
 Amount of Each Receipt this Period 12500.00
 Memo Item
CONTRIBUTION

C. HOWARD, DREW, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1948 OLD OCILLA RD
 City TIFTON State GA Zip Code 31794-1644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED OBSTETRICS & GYNECOLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513030
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15050.00
TOTAL This Period (last page this line number only).....	

**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 327 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, JOHN, B.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address TWO GREENWICH PLAZA
 City GREENWICH State CT Zip Code 06830-6353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AQR CAPITAL MANAGEMENT Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506089
 Amount of Each Receipt this Period
 10400.00
 Memo Item
CONTRIBUTION

B. HOWELL, ANDREW, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3695 VINEYARD RIDGE
 City CINCINNATI State OH Zip Code 45241-3293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FHLC CINCINNATI Occupation (for Individual) CEO
 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
 05 / 22 / 2017
Transaction ID : SA11A.505699
 Amount of Each Receipt this Period
 1250.00
 Memo Item
CONTRIBUTION

C. HUBBARD, ALLAN, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 SUNSET LANE
 City INDIANAPOLIS State IN Zip Code 46228-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) E&A COMPANIES Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2017
Transaction ID : SA11A.504202
 Amount of Each Receipt this Period
 12500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	24150.00
TOTAL This Period (last page this line number only).....▶	

**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 328 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUBBARD, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 DUNMORE ROAD
 City MARIETTA State GA Zip Code 30068-4224
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502347
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HUBBARD, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 DUNMORE ROAD
 City MARIETTA State GA Zip Code 30068-4224
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11A.505846
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HUBBARD, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 DUNMORE ROAD
 City MARIETTA State GA Zip Code 30068-4224
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2017
Transaction ID : SA11A.511791
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 329 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. HUBBARD, KATHRYN, F., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5600 SUNSET LANE

City INDIANAPOLIS	State IN	Zip Code 46228-1446
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) E&A COMPANIES	Occupation (for Individual) MARKETING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2017

Transaction ID : SA11A.504203

Amount of Each Receipt this Period
12500.00

Memo Item
CONTRIBUTION

B. HUDDLESTON, DANNY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10553 FM 1390

City SCURRY	State TX	Zip Code 75158-3133
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALLTEX SITE SERVICES	Occupation (for Individual) CONSTRUCTION
---	---

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
04		22		2017

Transaction ID : SA11A.503114

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HUDDLESTON, DANNY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10553 FM 1390

City SCURRY	State TX	Zip Code 75158-3133
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALLTEX SITE SERVICES	Occupation (for Individual) CONSTRUCTION
---	---

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
05		22		2017

Transaction ID : SA11A.506278

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12600.00
TOTAL This Period (last page this line number only).....	

**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 330 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUDDLESTON, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10553 FM 1390
 City SCURRY State TX Zip Code 75158-3133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLTEX SITE SERVICES Occupation (for Individual) CONSTRUCTION
 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
 06 / 08 / 2017
Transaction ID : SA11A.509486
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. HUDDLESTON, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10553 FM 1390
 City SCURRY State TX Zip Code 75158-3133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLTEX SITE SERVICES Occupation (for Individual) CONSTRUCTION
 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
 06 / 22 / 2017
Transaction ID : SA11A.512273
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. HUEBSCH, MICHAEL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 CROSS RD
 City DARIEN State CT Zip Code 06820-6107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLACK ROCK Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2017
Transaction ID : SA11A.500876
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5100.00
TOTAL This Period (last page this line number only).....▶	

**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 331 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUIZENGA, J.C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3755 36TH ST SE
 STE 100
 City GRAND RAPIDS State MI Zip Code 49512-3143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUIZENGA GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2017
Transaction ID : SA11A.501627
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

B. HUNT, DENNIS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 E 3RD ST APT 908
 City LITTLE ROCK State AR Zip Code 72201-1671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.504713
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. HURTADO, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 SHELLEY AVE
 F
 City CAMPBELL State CA Zip Code 95008-7078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COBHAM Occupation (for Individual) THECNICAL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503412
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 332 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. HURTADO, GUILLERMO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 SHELLEY AVE
F

City CAMPBELL State CA Zip Code 95008-7078

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COBHAM Occupation (for Individual) THECNICAL ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2017

Transaction ID : SA11A.506856

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HURTADO, GUILLERMO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 SHELLEY AVE
F

City CAMPBELL State CA Zip Code 95008-7078

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COBHAM Occupation (for Individual) THECNICAL ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2017

Transaction ID : SA11A.512643

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HUSBY, PAUL, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 LA BARRANCA DRIVE

City SEDONA State AZ Zip Code 86351-6936

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 ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2017

Transaction ID : SA11A.503303

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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

**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 333 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUSTON, DANNY, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 616 W JACKSON ST

City PARKER CITY	State IN	Zip Code 47368-9524
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTH AMERICAN MIDWAY ENTERTAINMENT	Occupation (for Individual) AMUSEMENTS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2017

Transaction ID : SA11A.504491

Amount of Each Receipt this Period
10000.00

Memo Item CONTRIBUTION

B. HUTCHISON, ELAINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4543 E. ANAHEIM STREET

City LONG BEACH	State CA	Zip Code 90804-3119
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARAGON EQUITIES	Occupation (for Individual) MANAGEMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2017

Transaction ID : SA11A.501061

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. HUTCHISON, ELAINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4543 E. ANAHEIM STREET

City LONG BEACH	State CA	Zip Code 90804-3119
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARAGON EQUITIES	Occupation (for Individual) MANAGEMENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2017

Transaction ID : SA11A.504305

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 334 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. HUTCHISON, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4543 E. ANAHEIM STREET
 City LONG BEACH State CA Zip Code 90804-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARAGON EQUITIES Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 04 / 2017
Transaction ID : SA11A.508772
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HUTH, MIRIAM, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 475 4TH FAIRWAY DRIVE R.1
 City ROSWELL State GA Zip Code 30076-3565
 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 ▼ 1450.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505649
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HUTH, MIRIAM, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 475 4TH FAIRWAY DRIVE R.1
 City ROSWELL State GA Zip Code 30076-3565
 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 ▼ 1450.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512517
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 335 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HYDE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6922 WOODSTREAM TERRACE
 City SEABROOK State MD Zip Code 20706-2144
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : SA11A.502564
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. HYDE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6922 WOODSTREAM TERRACE
 City SEABROOK State MD Zip Code 20706-2144
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2017
Transaction ID : SA11A.505905
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. HYDE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6922 WOODSTREAM TERRACE
 City SEABROOK State MD Zip Code 20706-2144
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2017
Transaction ID : SA11A.511759
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**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 336 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
IOSIVAS, MIHAI, , ,

Mailing Address **239 ANAPALAU PLACE**

City HONOLULU	State HI	Zip Code 96825-1835
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TORA TRADING SERVICES	Occupation (for Individual) ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2017

Transaction ID : SA11A.502722

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
IOSIVAS, MIHAI, , ,

Mailing Address **239 ANAPALAU PLACE**

City HONOLULU	State HI	Zip Code 96825-1835
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TORA TRADING SERVICES	Occupation (for Individual) ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2017

Transaction ID : SA11A.505961

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
IOSIVAS, MIHAI, , ,

Mailing Address **239 ANAPALAU PLACE**

City HONOLULU	State HI	Zip Code 96825-1835
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TORA TRADING SERVICES	Occupation (for Individual) ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2017

Transaction ID : SA11A.511719

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 337 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. IRANI, RAY, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11100 SANTA MONICA BLVD
 City LOS ANGELES State CA Zip Code 90025-3384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAY INVESTMENTS LLC Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **04 / 25 / 2017**
Transaction ID : SA11A.502954
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION

B. IRBY, STUART, M., MR, JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3917 VALLEY VIEW DR
 City LITTLE ROCK State AR Zip Code 72212-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS INC Occupation (for Individual) INVESTMENT BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **05 / 03 / 2017**
Transaction ID : SA11A.504164
 Amount of Each Receipt this Period 2700.00
 Memo Item
CONTRIBUTION

C. ISRAEL, RONEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 OAK VALLEY LANE
 City PURCHASE State NY Zip Code 10577-1145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AQR CAPITAL MANAGEMENT Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt **06 / 02 / 2017**
Transaction ID : SA11A.507913
 Amount of Each Receipt this Period 10400.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	38100.00
TOTAL This Period (last page this line number only).....▶	

**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 338 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVANCIC, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 NEW YORK AVE STE 1050
 City WASHINGTON State DC Zip Code 20005-6135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TARPLIN DOWNS & YOUNG Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.509055
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. JACOBY, JOHN, S., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8516 WATERS EDGE DRIVE
 City CHANHASSEN State MN Zip Code 55317-9749
 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 ▼ 300.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503966
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JACOBY, JOHN, S., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8516 WATERS EDGE DRIVE
 City CHANHASSEN State MN Zip Code 55317-9749
 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 ▼ 300.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11A.508673
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

**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 339 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOBY, JOHN, S., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8516 WATERS EDGE DRIVE
 City CHANHASSEN State MN Zip Code 55317-9749
 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 ▼ 300.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513712
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JAGANNATHAN, LAKSHMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4213 W BART DR.
 City CHANDLER State AZ Zip Code 85226-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL CORPORATION Occupation (for Individual) PRINCIPAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 10 / 2017
Transaction ID : SA11A.510067
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. JAHN, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 3RD ST SW UNIT 950
 City WASHINGTON State DC Zip Code 20024-3230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE FERTILIZER INSTITUTE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.501957
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

**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 340 OF 1054
	<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)
Team Ryan

A. JAIN, ANURAG, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5938 NORWAY RD

City DALLAS	State TX	Zip Code 75230-4004
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACCESS HEALTHCARE	Occupation (for Individual) MANAGING DIRECTOR
--	--

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
06		22		2017

Transaction ID : SA11A.512056

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. JAMES, JOSEPH, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 CEDAR ISLAND

City WILMINGTON	State NC	Zip Code 28409-2101
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : SA11A.505252

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

C. JAMES, THOMAS, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 BRUCE DRIVE

City JASPER	State GA	Zip Code 30143-4254
----------------	-------------	------------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2017

Transaction ID : SA11A.510790

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25800.00
TOTAL This Period (last page this line number only).....▶	

**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 341 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAN, ABDALI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 LAURELWOOD LANE
 City KENDALLVILLE State IN Zip Code 46755-9367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 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
 05 / 26 / 2017
Transaction ID : SA11A.506601
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. JENKINS, ROBERT, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9310 N UPPER RIVER ROAD
 City RIVER HILLS State WI Zip Code 53217-1031
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.504642
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. JENSEN, TONY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 E HEARTSTRONG STREET
 City SUPERIOR State CO Zip Code 80027-8128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROYAL GOLD Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506049
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

**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 342 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JERNIGAN, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 FOREST GLENN DRIVE
 City BIRMINGHAM State AL Zip Code 35213-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2017
Transaction ID : SA11A.501935
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JERNIGAN, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 FOREST GLENN DRIVE
 City BIRMINGHAM State AL Zip Code 35213-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2017
Transaction ID : SA11A.505745
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, ALICE, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3182 KEARNS CORNER
 City THE VILLAGES State FL Zip Code 32162-7443
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512510
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 343 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, ANDREW, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2425 CRAIG COVE RD
 City KNOXVILLE State TN Zip Code 37919-9314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEVERAGE CONTROL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512052
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. JOHNSTON, BARBARA, D., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1286 BURGANDY PLACE
 City KNOXVILLE State TN Zip Code 37919-8269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511286
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.502367
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

**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 344 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **04 / 15 / 2017**
Transaction ID : SA11A.502426
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **05 / 17 / 2017**
Transaction ID : SA11A.505849
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **06 / 17 / 2017**
Transaction ID : SA11A.511797
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**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 345 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. JOHNSON, EDITH, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 342 HIGHWAY 21
 City CLARKSVILLE State AR Zip Code 72830-7800
 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2017
Transaction ID : SA11A.500871
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, EDITH, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 342 HIGHWAY 21
 City CLARKSVILLE State AR Zip Code 72830-7800
 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502031
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, EDITH, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 342 HIGHWAY 21
 City CLARKSVILLE State AR Zip Code 72830-7800
 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.502944
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 346 OF 1054
(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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. JOHNSON, EDITH, M., MRS.,

Mailing Address 342 HIGHWAY 21

City CLARKSVILLE	State AR	Zip Code 72830-7800
---------------------	-------------	------------------------

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 ▼
325.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2017

Transaction ID : SA11A.510632

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. JOHNSON, FRANKLIN, , ,

Mailing Address 151 E PIKE RD

City FALKVILLE	State AL	Zip Code 35622-5101
-------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt
MM / DD / YYYY
04 / 17 / 2017

Transaction ID : SA11A.502342

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. JOHNSON, FRANKLIN, , ,

Mailing Address 151 E PIKE RD

City FALKVILLE	State AL	Zip Code 35622-5101
-------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt
MM / DD / YYYY
05 / 17 / 2017

Transaction ID : SA11A.505837

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**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 347 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JOHNSON, FRANKLIN, , ,			Date of Receipt MM / DD / YYYY 06 / 17 / 2017
Mailing Address 151 E PIKE RD			Transaction ID : SA11A.511789
City FALKVILLE	State AL	Zip Code 35622-5101	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JOHNS, JOHN, D., ,			Date of Receipt MM / DD / YYYY 06 / 16 / 2017
Mailing Address 2749 SOUTHWOOD RD			Transaction ID : SA11A.510553
City BIRMINGHAM	State AL	Zip Code 35223-1228	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) PROTECTIVE LIFE		Occupation (for Individual) INSURANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JOHNSON, JOSEPH, D., MR., II			Date of Receipt MM / DD / YYYY 05 / 22 / 2017
Mailing Address 377 ASHWOOD CT			Transaction ID : SA11A.505681
City TROY	State OH	Zip Code 45373-4500	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) JOE JOHNSON CHEVROLET		Occupation (for Individual) PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....	5600.00
TOTAL This Period (last page this line number only).....	

**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 348 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, LINDSEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 HAWKINS WAY
 City ALEXANDRIA State VA Zip Code 22314-6201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USMI Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.505874
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. JOHNSON, PETER, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 438
 City SAINT ALBANS State MO Zip Code 63073-0438
 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 ▼ 300.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501320
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JOHNSON, PETER, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 438
 City SAINT ALBANS State MO Zip Code 63073-0438
 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 ▼ 300.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507094
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**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 349 OF 1054
	<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)
Team Ryan

A. JOHNSON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8923 PRAIRIE SCHOONER CIRCLE

City SODDY DAISY	State TN	Zip Code 37379-3153
---------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2017

Transaction ID : SA11A.503501

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. JOHNSON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8923 PRAIRIE SCHOONER CIRCLE

City SODDY DAISY	State TN	Zip Code 37379-3153
---------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2017

Transaction ID : SA11A.507818

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. JOHNSON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8923 PRAIRIE SCHOONER CIRCLE

City SODDY DAISY	State TN	Zip Code 37379-3153
---------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2017

Transaction ID : SA11A.512851

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 350 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONAS, ARETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 CHRISTIAN VILLAGE CIRCLE
 205
 City LOUISVILLE State KY Zip Code 40243-1352
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2017
Transaction ID : SA11A.502854
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JONAS, ARETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 CHRISTIAN VILLAGE CIRCLE
 205
 City LOUISVILLE State KY Zip Code 40243-1352
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2017
Transaction ID : SA11A.506310
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. JONAS, ARETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 CHRISTIAN VILLAGE CIRCLE
 205
 City LOUISVILLE State KY Zip Code 40243-1352
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : SA11A.512219
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 351 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, A , , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 332 BRECKENRIDGE ROAD
PO BOX 2068

City ALBANY State TX Zip Code 76430-2756

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VAN OPERATING LTD Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 16 / 2017
Transaction ID : SA11A.510780

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. JONES, MICHELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8826 W OTTAWA AVE

City LITTLETON State CO Zip Code 80128-4038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCSi TOOLBOX LLC Occupation (for Individual) CO MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
04 / 07 / 2017
Transaction ID : SA11A.501279

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. JONES, MICHELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8826 W OTTAWA AVE

City LITTLETON State CO Zip Code 80128-4038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCSi TOOLBOX LLC Occupation (for Individual) CO MANAGER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
05 / 07 / 2017
Transaction ID : SA11A.505285

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00

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

**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 352 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, REGINALD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 MEADOWBANK RD

City OLD GREENWICH	State CT	Zip Code 06870-2312
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREENBRIAR EQUITY	Occupation (for Individual) CO-FOUNDER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2017

Transaction ID : SA11A.504882

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. JONES, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CAREFREE CT.

City GREENWOOD	State IN	Zip Code 46142-8501
-------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2017

Transaction ID : SA11A.503268

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. JONES, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CAREFREE CT.

City GREENWOOD	State IN	Zip Code 46142-8501
-------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2017

Transaction ID : SA11A.506722

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50200.00
TOTAL This Period (last page this line number only).....	

**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 353 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 CAREFREE CT.
 City GREENWOOD State IN Zip Code 46142-8501
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2017
Transaction ID : SA11A.512704
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JORDAN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12341 W SUNSET BLVD
 City LOS ANGELES State CA Zip Code 90049-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLASER WEIL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2017
Transaction ID : SA11A.502456
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. JORDAN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12341 W SUNSET BLVD
 City LOS ANGELES State CA Zip Code 90049-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLASER WEIL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.505709
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**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 354 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORDAN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12341 W SUNSET BLVD
 City LOS ANGELES State CA Zip Code 90049-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLASER WEIL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2017
Transaction ID : SA11A.510818
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JORDAN, JAMES, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 RIDGEVIEW CT
 City LITTLE ROCK State AR Zip Code 72227-2340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS Occupation (for Individual) INVESTMENT SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504336
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. JOSEPH, GEORGE, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2621 HANDASYDE AVE
 City CINCINNATI State OH Zip Code 45208-2717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOSEPH AUTO Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505671
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5550.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 355 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOYCE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8020 ELBRECHT DRIVE
 City CINCINNATI State OH Zip Code 45242-5109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE AVIATION Occupation (for Individual) GENERAL MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.505259
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. JOYCE, STEPHEN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1165 ORLO DR
 City MCLEAN State VA Zip Code 22102-1748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502966
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. JUMPER, BILLY, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14006 WOODTHORPE LANE
 City HOUSTON State TX Zip Code 77079-3241
 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 ▼ 300.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.504031
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6050.00
TOTAL This Period (last page this line number only)..... ▶

**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 356 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUMPER, BILLY, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14006 WOODTHORPE LANE
 City HOUSTON State TX Zip Code 77079-3241
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11A.508650
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JUMPER, BILLY, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14006 WOODTHORPE LANE
 City HOUSTON State TX Zip Code 77079-3241
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513632
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KALIL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 446 N CAMPBELL AVENUE, UNIT 1304
 City TUCSON State AZ Zip Code 85719-5672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KALIL BOTTLING Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017
Transaction ID : SA11A.501471
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 357 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KALIL, GEORGE, , ,

Mailing Address **446 N CAMPBELL AVENUE, UNIT 1304**

City **TUCSON** State **AZ** Zip Code **85719-5672**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **KALIL BOTTLING** Occupation (for Individual) **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2017

Transaction ID : SA11A.501961

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KANE, JOHN, , ,

Mailing Address **P.O. BOX 19107**

City **RALEIGH** State **NC** Zip Code **27619-9107**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **KANE REALTY** Occupation (for Individual) **REAL ESTATE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 26 / 2017

Transaction ID : SA11A.503373

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KANE, JEFFREY, J., MR.,

Mailing Address **7 OLD NECK RD**

City **MANCHESTER** State **MA** Zip Code **01944-1565**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **HP HOOD LLC** Occupation (for Individual) **MANAGER**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 07 / 2017

Transaction ID : SA11A.508852

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ **16000.00**

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

**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 358 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAPLAN, DANIEL, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 THEODORE FREMD AVE
 City RYE State NY Zip Code 10580-1451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DORF & NELSON LLP Occupation (for Individual) SENIOR COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 11 / 2017**
Transaction ID : SA11A.505258
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. KARWICK, BERNARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12632 ROAD G
 City CORTEZ State CO Zip Code 81321-9570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMPBIRD MANAGEMENT Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 19 / 2017**
Transaction ID : SA11A.502751
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KATIB, IMAD, , DR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 HOLSEN CT
 City BROOKFIELD State WI Zip Code 53005-2752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **06 / 02 / 2017**
Transaction ID : SA11A.507920
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7600.00
TOTAL This Period (last page this line number only).....	

**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 359 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAYNE, SUZANNE, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 AVENUE OF THE STARS 3RD FLOOR
 City LOS ANGELES State CA Zip Code 90067-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTSIDE ESTATE AGENCY Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.502955
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

B. KAZEMINIA, AMIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 S ORLANDO AVE STE 100
 City MAITLAND State FL Zip Code 32751-5660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OCI ASSOCIATES, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 25 / 2017
Transaction ID : SA11A.506678
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

C. KEEHAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 JAYCOX RD.
 City AVON State OH Zip Code 44011-1351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC,INC. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2017
Transaction ID : SA11A.503736
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	35100.00
TOTAL This Period (last page this line number only).....	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEEHAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 JAYCOX RD.
 City AVON State OH Zip Code 44011-1351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC,INC. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507470
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KEEHAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 JAYCOX RD.
 City AVON State OH Zip Code 44011-1351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC,INC. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513219
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KEELLEN, MATTHEW, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 TIMBER LANE
 City FALLS CHURCH State VA Zip Code 22046-3830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE KEELLEN GROUP, LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 02 / 2017
Transaction ID : SA11A.500799
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

**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 361 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEEN, C. MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2532 WHITE OAK RD
 City RALEIGH State NC Zip Code 27609-7614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OGLETREE DEAKINS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 25 / 2017**
Transaction ID : SA11A.502986
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. KEFFER, JEFFERY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 TEMPLE ST
 City ARLINGTON State MA Zip Code 02476-6343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGVIEW POWER LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 30 / 2017**
Transaction ID : SA11A.507098
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. KELCHNER, TODD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9320 ASH HOLLOW LANE
 City CENTERVILLE State OH Zip Code 45458-9663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELCHNER INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **05 / 22 / 2017**
Transaction ID : SA11A.505694
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

**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 362 OF 1054
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	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLETT, SAMUEL, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3450 RIDGEWOOD RD NW
 City ATLANTA State GA Zip Code 30327-2418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507929
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. KELLETT, STILES, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 GALLERIA PKWY STE 1800
 City ATLANTA State GA Zip Code 30339-5946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLETT INVESTMENT CORPORATION Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504787
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. KELLOGG, TOMMY, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 TRYON STREET
 City SOUTH GLASTONBURY State CT Zip Code 06073-3013
 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 ▼ 1000.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.501970
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00
TOTAL This Period (last page this line number only)..... ▶

**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 363 OF 1054
	<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)
Team Ryan

A. KELLY, JAMES, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 161 W 16TH ST APT 20C

City NEW YORK	State NY	Zip Code 10011-6208
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEDGESERV CORP	Occupation (for Individual) CEO
---	------------------------------------

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
05		15		2017

Transaction ID : SA11A.504862

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. KEMMERER, JOHN, L., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 6848

City JACKSON	State WY	Zip Code 83002-6848
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JACKSON HOLE MOUNTAIN RESORT	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2017

Transaction ID : SA11A.513177

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. KENDALL, GLENNA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9816 24TH AVENUE NW

City SEATTLE	State WA	Zip Code 98117-2507
-----------------	-------------	------------------------

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 ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2017

Transaction ID : SA11A.505117

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50200.00
TOTAL This Period (last page this line number only).....	

**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 364 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENDALL, LINDA, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 CLUB HOUSE ROAD
 City KEY LARGO State FL Zip Code 33037-3600
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2017
Transaction ID : SA11A.500967
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. KENDRICK, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 NEW HAMPSHIRE AVE NW
 City WASHINGTON State DC Zip Code 20036-1500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AKIN GUMP STRAUSS HAUER & FELD LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512805
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. KENNEDY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 E PECAN STREET SUITE 2810
 City SAN ANTONIO State TX Zip Code 78205-1586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508925
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10800.00
TOTAL This Period (last page this line number only).....	

**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 365 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNEY, STEPHEN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 EXPOSITION PL
STE 101

City RALEIGH State NC Zip Code 27615-3356

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENNEY PROPERTIES Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017

Transaction ID : SA11A.506092

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. KENNEDY, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 813

City JANESVILLE State WI Zip Code 53547-0813

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCK ROAD BUILDERS Occupation (for Individual) CONTRACTER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017

Transaction ID : SA11A.504699

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. KENT, VESTA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 KAUFMAN DRIVE

City PETERBOROUGH State NH Zip Code 03458-1520

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 ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2017

Transaction ID : SA11A.505438

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

**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 366 OF 1054
<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)
Team Ryan

A. KENT, WILLIAM, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 908001

City MIDLAND	State TX	Zip Code 79708-0001
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) KENT DISTRIBUTORS INC		Occupation (for Individual) PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017
Transaction ID : SA11A.508929

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

B. KERR, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6621 125 STREET CT E

City PUYALLUP	State WA	Zip Code 98373-8820
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MULTICARE HEALTH SYSTEMS		Occupation (for Individual) PHYSICIAN
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
04 / 17 / 2017
Transaction ID : SA11A.502345

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. KERR, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6621 125 STREET CT E

City PUYALLUP	State WA	Zip Code 98373-8820
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MULTICARE HEALTH SYSTEMS		Occupation (for Individual) PHYSICIAN
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
05 / 17 / 2017
Transaction ID : SA11A.505821

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 367 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERR, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6621 125 STREET CT E
 City PUYALLUP State WA Zip Code 98373-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MULTICARE HEALTH SYSTEMS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 17 / 2017
Transaction ID : SA11A.511767
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KERRY, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2032 TANGLEWOOD WAY NE
 City ST. PETERSBURG State FL Zip Code 33702-4752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CO-OP FINANCIAL SERVICES Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.503263
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KHAN, ZUBAIR, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4407 SANDIA RUN
 City FT. WAYNE State IN Zip Code 46845-9074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506607
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**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 368 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KHOURI, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 EXECUTIVE CIR
 City IRVINE State CA Zip Code 92614-6746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTERN NATIONAL PROPERTY MANAGEMENT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5400.00

Date of Receipt **04 / 25 / 2017**
Transaction ID : SA11A.502975
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

B. KIELLAND, HALVOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 738 WEED ST
 City NEW CANAAN State CT Zip Code 06840-4016
 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 ▼ 600.00

Date of Receipt **04 / 27 / 2017**
Transaction ID : SA11A.503545
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KIELLAND, HALVOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 738 WEED ST
 City NEW CANAAN State CT Zip Code 06840-4016
 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 ▼ 600.00

Date of Receipt **05 / 27 / 2017**
Transaction ID : SA11A.507835
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5600.00
TOTAL This Period (last page this line number only).....	

**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 369 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIELLAND, HALVOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 738 WEED ST
 City NEW CANAAN State CT Zip Code 06840-4016
 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 ▼ 600.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512873
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KIELLA, SUZANNE, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1344
 City TEMPLE State TX Zip Code 76503-1344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAM HOMEBUILDERS Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.508255
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. KIM, DONG, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1332 PASEO DEL MAR
 City PALOS VERDES ESTAT State CA Zip Code 90274-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 20 / 2017
Transaction ID : SA11A.502689
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3100.00
TOTAL This Period (last page this line number only).....	

**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 370 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIM, TARO, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 WOODLOT ROAD
 City RIDGE State NY Zip Code 11961-1905
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : SA11A.504398
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. KING, BENTLEY, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 400
 City FORT STOCKTON State TX Zip Code 79735-0400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHWEST MARKETERS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508967
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. KING, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3637
 City MIDLAND State TX Zip Code 79702-3637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508966
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

**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 371 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KINGDON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 993 5TH AVE 7TH FL
 City NEW YORK State NY Zip Code 10028-0105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KINGDON CAPITAL MANAGEMENT Occupation (for Individual) HEDGE FUND MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512957
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. KINGREY, JENNY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 955 N THIRD ST
 City TIPP CITY State OH Zip Code 45371-3055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505680
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. KINGREY, KEITH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 955 N THIRD ST
 City TIPP CITY State OH Zip Code 45371-3055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SK MOLD AND TOOL Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505679
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

**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 372 OF 1054
	<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)
Team Ryan

A. KIRKPATRICK, STUART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 785
 City SOUTHAMPTON State NY Zip Code 11969-0785
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEWHOUSE GALLERIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502781
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KISTER, RONALD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1444 MORTON DRIVE
 City ASHTABULA State OH Zip Code 44004-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 20 / 2017
Transaction ID : SA11A.502688
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. KLEIN, RICHARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3635 CHESTERWOOD COURT
 City BROOKFIELD State WI Zip Code 53005-2385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AURORA HEALTHCARE Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504656
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
TOTAL This Period (last page this line number only)..... ▶

**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 373 OF 1054
	<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)
Team Ryan

A. KLEIN, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4207 PALOMINO COURT

City MIDDLETOWN	State MD	Zip Code 21769-6639
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLAS	Occupation (for Individual) EMPLOYEE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2017

Transaction ID : SA11A.503267

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KLEPPER, KENNY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 295 GLEN PLACE

City FRANKLIN LAKES	State NJ	Zip Code 07417-2707
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLEPPER KENNY	Occupation (for Individual) CEO
--	------------------------------------

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
05		31		2017

Transaction ID : SA11A.508425

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. KLINSKY, STEVEN, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 787 7TH AVE 49TH FL

City NEW YORK	State NY	Zip Code 10019-6018
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEW MOUNTAIN CAPITAL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2017

Transaction ID : SA11A.509444

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50350.00
TOTAL This Period (last page this line number only).....	

**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 374 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLUZNIK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5180 PARK AVENUE
 City WHITE BEAR TOWNSHI State MN Zip Code 55110-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 06 / 2017
Transaction ID : SA11A.509285
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KNAPPLE, WHITFIELD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4703 CRESTWOOD DR
 City LITTLE ROCK State AR Zip Code 72207-5435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504679
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KNIFFIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9118 BAY BURY LANE
 City WEST PALM BEACH State FL Zip Code 33411-1890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE VIKING AGENCY Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.504022
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**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 375 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIFFIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9118 BAY BURY LANE
 City WEST PALM BEACH State FL Zip Code 33411-1890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE VIKING AGENCY Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507270
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. KNIFFIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9118 BAY BURY LANE
 City WEST PALM BEACH State FL Zip Code 33411-1890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE VIKING AGENCY Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513704
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. KNIGHT, DAVID, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 W PALISADES DR
 City LITTLE ROCK State AR Zip Code 72207-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS Occupation (for Individual) GENERAL COUNSEL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.504709
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**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 376 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX337
 City ROSICLARE State IL Zip Code 62982-0337
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503436
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KNIGHT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX337
 City ROSICLARE State IL Zip Code 62982-0337
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506879
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KNIGHT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX337
 City ROSICLARE State IL Zip Code 62982-0337
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512660
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 377 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2017
Transaction ID : SA11A.502871
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2017
Transaction ID : SA11A.506296
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : SA11A.512212
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 378 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, PHILIP, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BOWERMAN DR
 City BEAVERTON State OR Zip Code 97005-0979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE, INC. Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512953
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

B. KNIPPENBERG, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9795 NEW HOPE RD
 City RISING SUN State IN Zip Code 47040-9111
 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 ▼ 300.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503728
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KNIPPENBERG, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9795 NEW HOPE RD
 City RISING SUN State IN Zip Code 47040-9111
 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 ▼ 300.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507465
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100100.00
TOTAL This Period (last page this line number only).....▶	

**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 379 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIPPENBERG, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9795 NEW HOPE RD
 City RISING SUN State IN Zip Code 47040-9111
 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 ▼ 300.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513203
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KNOX, DORIS, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23144 S SHORE DRIVE
 City EDWARDSBURG State MI Zip Code 49112-8502
 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 ▼ 1338.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504410
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KNOX, DORIS, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23144 S SHORE DRIVE
 City EDWARDSBURG State MI Zip Code 49112-8502
 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 ▼ 1338.00

Date of Receipt 06 / 15 / 2017
Transaction ID : SA11A.510513
 Amount of Each Receipt this Period 563.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	813.00
TOTAL This Period (last page this line number only).....▶	

**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 380 OF 1054
<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)
Team Ryan

A. KNOX, DORIS, M., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23144 S SHORE DRIVE
City EDWARDSBURG State MI Zip Code 49112-8502
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 ▼ 1338.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512084
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. KOCUR, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5156 E OTERO CIR
City CENTENNIAL State CO Zip Code 80122-3880
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CHS-DENVER Occupation (for Individual) REAL ESTATE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 19 / 2017
Transaction ID : SA11A.502735
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KOCUR, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5156 E OTERO CIR
City CENTENNIAL State CO Zip Code 80122-3880
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CHS-DENVER Occupation (for Individual) REAL ESTATE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505965
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**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 381 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOCUR, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5156 E OTERO CIR
 City CENTENNIAL State CO Zip Code 80122-3880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHS-DENVER Occupation (for Individual) REAL ESTATE
 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
 06 / 19 / 2017
Transaction ID : SA11A.511723
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KOHLHEPP, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 CINTAS BLVD
 City MASON State OH Zip Code 45040-9151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CINTAS GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2017
Transaction ID : SA11A.504199
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. KOO KIM, DONG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1332 PASEO DEL MAR
 City PALOS VERDES ESTAT State CA Zip Code 90274-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2017
Transaction ID : SA11A.512109
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	26050.00
TOTAL This Period (last page this line number only).....	

**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 382 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOTICK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3435 OCEAN PARK BLVD #107 PMB K
 City SANTA MONICA State CA Zip Code 90405-3320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACTIVISON BLIZZARD Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **04 / 18 / 2017**
Transaction ID : SA11A.502281
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. KRAFT, ROBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 E CHICAGO ST SUITE 510
 City MILWAUKEE State WI Zip Code 53202-5896
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST PATHWAY PARTNERS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504663
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KRAGOVICH, NICK, , MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 BELLVIEW DRIVE
 City ROCK SPRINGS State WY Zip Code 82901-4504
 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 ▼ 220.00

Date of Receipt **05 / 10 / 2017**
Transaction ID : SA11A.505229
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11070.00
TOTAL This Period (last page this line number only).....	

**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 383 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAGOVICH, NICK, , MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 BELLVIEW DRIVE
 City ROCK SPRINGS State WY Zip Code 82901-4504
 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 ▼ 220.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511253
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503400
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506848
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**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 384 OF 1054
	<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)
Team Ryan

A. KRAUSE, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 N HERKIMER ST

City JOLIET	State IL	Zip Code 60432-1057
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2017

Transaction ID : SA11A.512638

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KRESA, KENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5605 SE SCENIC LN
STE 300

City VANCOUVER	State WA	Zip Code 98661-0523
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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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
04		18		2017

Transaction ID : SA11A.502283

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. KREVIZER, JAMES, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4707 WASHINGTON

City KENOSHA	State WI	Zip Code 53144-1597
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2017

Transaction ID : SA11A.504857

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	26100.00
TOTAL This Period (last page this line number only).....▶	

**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 385 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK RD
 City FAIRFIELD State CT Zip Code 06824-6348
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503779
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK RD
 City FAIRFIELD State CT Zip Code 06824-6348
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503780
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK RD
 City FAIRFIELD State CT Zip Code 06824-6348
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2017
Transaction ID : SA11A.507641
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**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 386 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK RD
 City FAIRFIELD State CT Zip Code 06824-6348
 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 ▼ 275.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507642
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK RD
 City FAIRFIELD State CT Zip Code 06824-6348
 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 ▼ 275.00

Date of Receipt 06 / 12 / 2017
Transaction ID : SA11A.510290
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK RD
 City FAIRFIELD State CT Zip Code 06824-6348
 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 ▼ 275.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511915
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 387 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRINGEL, ANGELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 932 SOUTH PINE CREEK RD

City FAIRFIELD State CT Zip Code 06824-6348

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 ▼ 275.00

Date of Receipt
06 / 19 / 2017
Transaction ID : SA11A.511957

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. KRINGEL, ANGELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 932 SOUTH PINE CREEK RD

City FAIRFIELD State CT Zip Code 06824-6348

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 ▼ 275.00

Date of Receipt
06 / 26 / 2017
Transaction ID : SA11A.512621

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. KRISTIANSON, JOHN, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 236 MIRA MAR AVE

City LONG BEACH State CA Zip Code 90803-6126

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENROLLED AGENT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
04 / 12 / 2017
Transaction ID : SA11A.501571

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

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

**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 388 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRISTIANSON, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 236 MIRA MAR AVE
 City LONG BEACH State CA Zip Code 90803-6126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENROLLED AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.505399
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KRISTIANSON, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 236 MIRA MAR AVE
 City LONG BEACH State CA Zip Code 90803-6126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENROLLED AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2017
Transaction ID : SA11A.506381
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KRISTIANSON, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 236 MIRA MAR AVE
 City LONG BEACH State CA Zip Code 90803-6126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENROLLED AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2017
Transaction ID : SA11A.507646
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 389 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRISTIANSON, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 236 MIRA MAR AVE
 City LONG BEACH State CA Zip Code 90803-6126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENROLLED AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 12 / 2017
Transaction ID : SA11A.509989
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KRISTEN, MARK, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7700 KOPPE BRIDGE RD
 City COLLEGE STATION State TX Zip Code 77845-7057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KRISTEN DISTRIBUTING CO Occupation (for Individual) WHOLESALE BEER DISTRIBUTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510634
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BOULEVARD, PH 101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 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 ▼ 250.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501000
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5275.00
TOTAL This Period (last page this line number only)..... ▶

**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 390 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRUGER, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 MINUTEMEN CSWY
 UNIT 208
 City COCOA BEACH State FL Zip Code 32931-2041
 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 ▼ 300.00

Date of Receipt **04 / 19 / 2017**
Transaction ID : SA11A.502744
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KRUGER, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 MINUTEMEN CSWY
 UNIT 208
 City COCOA BEACH State FL Zip Code 32931-2041
 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 ▼ 300.00

Date of Receipt **05 / 19 / 2017**
Transaction ID : SA11A.505970
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRUGER, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 MINUTEMEN CSWY
 UNIT 208
 City COCOA BEACH State FL Zip Code 32931-2041
 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 ▼ 300.00

Date of Receipt **06 / 19 / 2017**
Transaction ID : SA11A.511728
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 391 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KTELEH, TAREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10727 CHASE CT
 City FISHERS State IN Zip Code 46037-9433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IU HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2017
Transaction ID : SA11A.507919
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. KUDAIMI, MUHAMMAD, M., DR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17200 KIMBARK AVE
 City SOUTH HOLLAND State IL Zip Code 60473-3580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANSISCAN HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2017
Transaction ID : SA11A.507934
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. KUEBLER, JOHN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15814 E MAJESTIC STREET
 City WICHITA State KS Zip Code 67230-6607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.510731
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3200.00
TOTAL This Period (last page this line number only).....	

**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 392 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUNKLER, WILLIAM, C., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 N LAKESHORE DR STE 23A
 City CHICAGO State IL Zip Code 60610-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CC INDUSTRIES Occupation (for Individual) EXECUTIVE VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.500861
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. KURTZ, ROBERT, M., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 E MARYLYN AVENUE, APT H122
 City STATE COLLEGE State PA Zip Code 16801-6271
 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 ▼ 300.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511482
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. KYLLO, RACHEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7666 SOUTH BAY DR
 City MINNEAPOLIS State MN Zip Code 55438-2900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEMPS LLC Occupation (for Individual) SENIOR MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512180
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	26300.00
TOTAL This Period (last page this line number only).....▶	

**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 393 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAMANTIA, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2220 MON MACK
 City EDINBURG State TX Zip Code 78539-8884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L&F DIST, LLC Occupation (for Individual) BEER DISTRIBUTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2017
Transaction ID : SA11A.509451
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LAMANTIA, ANTHONY, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4130 OCEAN DR
 City CORPUS CHRISTI State TX Zip Code 78411-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L&F DIST, LLC Occupation (for Individual) BEER DISTRIBUTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2017
Transaction ID : SA11A.509452
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LAMANTIA, JOE, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 N MCCOLL RD
 City MCALLEN State TX Zip Code 78501-9160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512967
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	

**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 394 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAMANTIA, LAUREN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 458 CORAL PL
 City CORPUS CHRISTI State TX Zip Code 78411-1531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L&F DIST LLC Occupation (for Individual) BEER DISTRIBUTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.509050
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. LAMANTIA, MOLLY, JO, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 402 NYE
 City LAREDO State TX Zip Code 78041-2722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L&F DIST LLC Occupation (for Individual) BEER DISTRIBUTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2017
Transaction ID : SA11A.510540
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. LAMANTIA, STEPHEN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 CROSSROADS
 City LAREDO State TX Zip Code 78045-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLORES CREDIT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.512958
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

**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 395 OF 1054
	<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)
Team Ryan

A. LANDENBERGER, C. FREDERICK, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 S ABREGO DRIVE
 APT. 208
 City GREEN VALLEY State AZ Zip Code 85614-1551
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : SA11A.500478
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. LANDIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9560 HUNTINGTON LANE
 City INDIANAPOLIS State IN Zip Code 46260-6076
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2017
Transaction ID : SA11A.500793
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. LANDRUM, CAROLYN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 E HOUSTON AVENUE
 City MCALLEN State TX Zip Code 78501-9021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 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
 04 / 12 / 2017
Transaction ID : SA11A.501470
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**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 396 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGDALE, JOHN, W., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5048
 City VALDOSTA State GA Zip Code 31603-5048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE LANGDALE CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2017
Transaction ID : SA11A.500939
 Amount of Each Receipt this Period
 15000.00
 Memo Item
 CONTRIBUTION

B. LANGENDORF, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 S GARFIELD AVE 319
 City LOVELAND State CO Zip Code 80537-7377
 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 ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2017
Transaction ID : SA11A.503094
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LANGENDORF, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 S GARFIELD AVE 319
 City LOVELAND State CO Zip Code 80537-7377
 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 ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2017
Transaction ID : SA11A.504558
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15125.00
TOTAL This Period (last page this line number only).....	

**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 397 OF 1054
	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LANGENDORF, PATRICIA, M., ,		Date of Receipt MM / DD / YYYY 05 / 23 / 2017 Transaction ID : SA11A.506386
Mailing Address 2101 S GARFIELD AVE 319		Amount of Each Receipt this Period 50.00
City LOVELAND	State CO	Zip Code 80537-7377
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LANGENDORF, PATRICIA, M., ,		Date of Receipt MM / DD / YYYY 06 / 23 / 2017 Transaction ID : SA11A.512387
Mailing Address 2101 S GARFIELD AVE 319		Amount of Each Receipt this Period 50.00
City LOVELAND	State CO	Zip Code 80537-7377
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LANGELIUS, ROBERT, , ,		Date of Receipt MM / DD / YYYY 04 / 24 / 2017 Transaction ID : SA11A.503079
Mailing Address 32 CLINTON STREET		Amount of Each Receipt this Period 100.00
City WHITE PLAINS	State NY	Zip Code 10603-3604
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 398 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. LANGONE, KENNETH, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 375 PARK AVE

City NEW YORK	State NY	Zip Code 10152-0002
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INREMEL	Occupation (for Individual) BANKER
--	---------------------------------------

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
05		03		2017

Transaction ID : SA11A.504153

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. LANIER, BECKY, S., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13706 FALBA

City HOUSTON	State TX	Zip Code 77070-3809
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

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
06		07		2017

Transaction ID : SA11A.508945

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. LANNIN, WILLIAM, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2033 BUTTERFLY LANE, APT CC420

City NAPERVILLE	State IL	Zip Code 60563-5314
--------------------	-------------	------------------------

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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2017

Transaction ID : SA11A.504886

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50200.00
TOTAL This Period (last page this line number only).....	

**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 399 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANOUE, LEONARD, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150. GESSNER
 6B
 City HOUSTON State TX Zip Code 77024-6137
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2017
Transaction ID : SA11A.501944
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LARI, AKBAR, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 MADISON AVE
 City NEW YORK State NY Zip Code 10128-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLAREMONT GROUP Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506579
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. LATHAM, KENNETH, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 WOODLEE ROAD
 City COLD SPRING HARBOR State NY Zip Code 11724-2315
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.505184
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6100.00
TOTAL This Period (last page this line number only).....	

**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 400 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAUB, STEVE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 ATHERTON AVE
 City ATHERTON State CA Zip Code 94027-5438
 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 ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506022
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

B. LAVENDER, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address AV LOS DEPORTES 13
 City ACAPULCO State IA Zip Code 39690-
 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 ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11A.500734
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. LAVENDER, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address AV LOS DEPORTES 13
 City ACAPULCO State IA Zip Code 39690-
 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 ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2017
Transaction ID : SA11A.501297
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50055.00
TOTAL This Period (last page this line number only).....▶	

**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 401 OF 1054
	<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)
Team Ryan

A. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 39690-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2017

Transaction ID : SA11A.503872

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 39690-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2017

Transaction ID : SA11A.505297

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 39690-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2017

Transaction ID : SA11A.508124

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**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 402 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAVENDER, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address AV LOS DEPORTES 13
 City ACAPULCO State IA Zip Code 39690-
 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 ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.509358
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LAVENDER, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address AV LOS DEPORTES 13
 City ACAPULCO State IA Zip Code 39690-
 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 ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513563
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LAWRENCE, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 426 SPENCER AVE.
 City LANCASTER State PA Zip Code 17603-4933
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2017
Transaction ID : SA11A.503729
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 403 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. LAWRENCE, BYRON, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 426 SPENCER AVE.
City LANCASTER State PA Zip Code 17603-4933
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 ▼ 300.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507467
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LAWRENCE, BYRON, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 426 SPENCER AVE.
City LANCASTER State PA Zip Code 17603-4933
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 ▼ 300.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513217
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LAWRENCE, GAYLON, M., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 96
City WILSON State AR Zip Code 72395-0096
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) THE LAWRENCE GROUP Occupation (for Individual) AGRICULTURE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504160
Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

**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 404 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAYMAN, LANNY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5613 WOODBINE LANE
 City SAN ANGELO State TX Zip Code 76904-8794
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STANDARD SALES CO Occupation (for Individual) PRESIDENT AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512047
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. LEACH, AMY, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2735 RACQUET CLUB DR.
 City MIDLAND State TX Zip Code 79705-7433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508955
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. LEACH, TIMOTHY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2735 RACQUET CLUB DR
 City MIDLAND State TX Zip Code 79705-7433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COG OPERATING LLC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508930
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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 405 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LECHLEITER, JOHN, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **ONE NORTH ILLINOIS RESIDENCE 2302**

City INDIANAPOLIS	State IN	Zip Code 46204-1935
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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 ▼
12500.00

Date of Receipt
05 / 08 / 2017

Transaction ID : SA11A.504315

Amount of Each Receipt this Period
12500.00

Memo Item
CONTRIBUTION

B. LECHLEITER, SARAH, L., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **1 N ILLINOIS ST RESIDENCE 2302**

City INDIANAPOLIS	State IN	Zip Code 46204-1935
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
05 / 08 / 2017

Transaction ID : SA11A.504337

Amount of Each Receipt this Period
12500.00

Memo Item
CONTRIBUTION

C. LEEPER, SAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **36567 S OCOTILLO CANYON DRIVE**

City TUCSON	State AZ	Zip Code 85739-2287
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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 ▼
1500.00

Date of Receipt
05 / 31 / 2017

Transaction ID : SA11A.508008

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	26000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 406 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEEPER, SAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36567 S OCOTILLO CANYON DRIVE
 City TUCSON State AZ Zip Code 85739-2287
 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 ▼ 1500.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511142
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LEHMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5847 GOVERNORS HILL
 City ALEXANDRIA State VA Zip Code 22310-2358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILMER HALE Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 11 / 2017
Transaction ID : SA11A.501463
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. LEIGH, DAVID, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 N LOOP 121
 City BELTON State TX Zip Code 76513-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506060
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

**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 407 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEMUNYON, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 NEW JERSEY AVE NW STE 900
 City WASHINGTON State DC Zip Code 20001-2271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEMUNYON GROUP, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 02 / 2017
Transaction ID : SA11A.500798
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. LENHART, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1370 LITTLE NECK ROAD
 City VIRGINIA BEACH State VA Zip Code 23452-4719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEGELLAN Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.502326
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LENHART, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1370 LITTLE NECK ROAD
 City VIRGINIA BEACH State VA Zip Code 23452-4719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEGELLAN Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 17 / 2017
Transaction ID : SA11A.505823
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2600.00
TOTAL This Period (last page this line number only)..... ▶

**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 408 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LENHART, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1370 LITTLE NECK ROAD
City VIRGINIA BEACH State VA Zip Code 23452-4719
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) MEGELLAN Occupation (for Individual) PHARMACIST
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 17 / 2017**
Transaction ID : SA11A.511781
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LESH, RYAN, E., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7423 S BROADWAY
City RED HOOK State NY Zip Code 12571-1747
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NAPA Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt **04 / 16 / 2017**
Transaction ID : SA11A.502584
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LESH, RYAN, E., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7423 S BROADWAY
City RED HOOK State NY Zip Code 12571-1747
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NAPA Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt **05 / 16 / 2017**
Transaction ID : SA11A.505594
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**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 409 OF 1054
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LESH, RYAN, E., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7423 S BROADWAY
 City RED HOOK State NY Zip Code 12571-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAPA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.511160
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEVANG, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10681 HWY 73
 City KEENE State ND Zip Code 58847-9460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 02 / 2017
Transaction ID : SA11A.501093
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEVANG, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10681 HWY 73
 City KEENE State ND Zip Code 58847-9460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2017
Transaction ID : SA11A.504178
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 410 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVY, EDWARD, C., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8800 DIX AVE
 City DETROIT State MI Zip Code 48209-1093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD C LEVY CO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510828
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. LEWIS, JOHN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8328 CARLOWAY RD
 City INDIANAPOLIS State IN Zip Code 46236-7306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504683
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LEYENDEKKER, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9001 AVENUE 360
 City VISALIA State CA Zip Code 93291-8947
 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 ▼ 2500.00

Date of Receipt 05 / 09 / 2017
Transaction ID : SA11A.504576
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 52500.00
TOTAL This Period (last page this line number only)..... ▶

**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 411 OF 1054
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	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIANG, SUSAN, S., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 FROG LEAP TRAIL NW

City KENNESAW	State GA	Zip Code 30152-6213
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEALTH MARK INC	Occupation (for Individual) ACCOUNTANT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2017

Transaction ID : SA11A.501661

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. LIEW, JOHN, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 GREENWICH PLAZA

City GREENWICH	State CT	Zip Code 06830-6353
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AQR	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
44300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2017

Transaction ID : SA11A.509445

Amount of Each Receipt this Period
44300.00

Memo Item CONTRIBUTION

C. LILLARD, JOHN, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1340 N WAUKEGAN ROAD

City LAKE FOREST	State IL	Zip Code 60045-1147
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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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2017

Transaction ID : SA11A.507905

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	45800.00
TOTAL This Period (last page this line number only).....▶	

**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 412 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINCOLN, EVE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 S. YOSEMITE STREET
 828
 City DENVER State CO Zip Code 80237-1812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSCHETTER HAMRICK SULZER Occupation (for Individual) CLIENT & PUBLIC RELATIONS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2017
Transaction ID : SA11A.502790
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LINCOLN, EVE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 S. YOSEMITE STREET
 828
 City DENVER State CO Zip Code 80237-1812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSCHETTER HAMRICK SULZER Occupation (for Individual) CLIENT & PUBLIC RELATIONS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2017
Transaction ID : SA11A.506342
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LINCOLN, EVE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 S. YOSEMITE STREET
 828
 City DENVER State CO Zip Code 80237-1812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSCHETTER HAMRICK SULZER Occupation (for Individual) CLIENT & PUBLIC RELATIONS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2017
Transaction ID : SA11A.511934
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 413 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDIG, LARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 ARGONNE FOREST TRAIL
 UNIT A
 City AUSTIN State TX Zip Code 78759-2226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DIGITAL MARKETER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1660.00

Date of Receipt
 04 / 25 / 2017
Transaction ID : SA11A.503248
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. LINDIG, LARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 ARGONNE FOREST TRAIL
 UNIT A
 City AUSTIN State TX Zip Code 78759-2226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DIGITAL MARKETER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1660.00

Date of Receipt
 04 / 25 / 2017
Transaction ID : SA11A.503272
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. LINDIG, LARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 ARGONNE FOREST TRAIL
 UNIT A
 City AUSTIN State TX Zip Code 78759-2226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DIGITAL MARKETER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1660.00

Date of Receipt
 05 / 25 / 2017
Transaction ID : SA11A.506711
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 414 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDIG, LARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 ARGONNE FOREST TRAIL
 UNIT A
 City AUSTIN State TX Zip Code 78759-2226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DIGITAL MARKETER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2017
Transaction ID : SA11A.506720
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. LINDIG, LARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 ARGONNE FOREST TRAIL
 UNIT A
 City AUSTIN State TX Zip Code 78759-2226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DIGITAL MARKETER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2017
Transaction ID : SA11A.512702
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LINDIG, LARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 ARGONNE FOREST TRAIL
 UNIT A
 City AUSTIN State TX Zip Code 78759-2226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DIGITAL MARKETER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2017
Transaction ID : SA11A.512708
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**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 415 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDNER, CARL, H., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 E 4TH ST 40S
 City CINCINNATI State OH Zip Code 45202-4245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN FINANCIAL GROUP, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 32500.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.500873
 Amount of Each Receipt this Period 25000.00
 Memo Item
 CONTRIBUTION

B. LINDNER, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7725 BUCKINGHAM RD
 City CINCINNATI State OH Zip Code 45243-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN FINANCIAL GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500942
 Amount of Each Receipt this Period 25000.00
 Memo Item
 CONTRIBUTION

C. LINDSEY, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17101 VANEMAN ST.
 City PETERSBURG State IL Zip Code 62675-7058
 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 ▼ 241.00

Date of Receipt 04 / 16 / 2017
Transaction ID : SA11A.502387
 Amount of Each Receipt this Period 54.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50054.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 416 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. LINDSEY, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 17101 VANEMAN ST.
City PETERSBURG State IL Zip Code 62675-7058
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 ▼ 241.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.505598
Amount of Each Receipt this Period 54.00
 Memo Item CONTRIBUTION

B. LINEBAUGH, DANIEL, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1300 ROLLINGBROOK DR. STE 601
City BAYTOWN State TX Zip Code 77521-3863
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) THE LINEBAUGH LAW FIRM, PC Occupation (for Individual) ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504803
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LITTON, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1433 CEDAR POST LANE #5
City HOUSTON State TX Zip Code 77055-4340
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SPRING BRANCH ISD Occupation (for Individual) CAREER & TECHNICAL ED. COUNSEI
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 27 / 2017
Transaction ID : SA11A.503506
Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1089.00
TOTAL This Period (last page this line number only).....▶

**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 417 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LITTON, BEVERLY, , ,		Date of Receipt MM / DD / YYYY 05 / 27 / 2017 Transaction ID : SA11A.507820
Mailing Address 1433 CEDAR POST LANE #5		Amount of Each Receipt this Period 35.00
City HOUSTON	State TX	Zip Code 77055-4340
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SPRING BRANCH ISD	Occupation (for Individual) CAREER & TECHNICAL ED. COUNSE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LITTON, BEVERLY, , ,		Date of Receipt MM / DD / YYYY 06 / 27 / 2017 Transaction ID : SA11A.512853
Mailing Address 1433 CEDAR POST LANE #5		Amount of Each Receipt this Period 35.00
City HOUSTON	State TX	Zip Code 77055-4340
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SPRING BRANCH ISD	Occupation (for Individual) CAREER & TECHNICAL ED. COUNSE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LOEB, DANIEL, S., ,		Date of Receipt MM / DD / YYYY 04 / 05 / 2017 Transaction ID : SA11A.500869
Mailing Address 15 CENTRAL PARK W PENTHOUSE 39		Amount of Each Receipt this Period 50000.00
City NEW YORK	State NY	Zip Code 10023-7719
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) THIRD POINT LLC	Occupation (for Individual) INVESTMENT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 50000.00	

SUBTOTAL of Receipts This Page (optional).....▶	50070.00
TOTAL This Period (last page this line number only).....▶	

**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 418 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LOGOTHETIS, NICHOLAS, MICHAEL, MR.,			Date of Receipt
Mailing Address 134 E 40TH ST			<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2017"/>
City NEW YORK	State NY	Zip Code 10016-1706	Transaction ID : SA11A.505700
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LOMMEN, KAREN, A., ,			Date of Receipt
Mailing Address 38017 COUNTY ROAD 17			<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2017"/>
City ELIZABETH	State CO	Zip Code 80107-8222	Transaction ID : SA11A.504905
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer (for Individual) SELF		Occupation (for Individual) RANCHER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LONG, RYAN, , ,			Date of Receipt
Mailing Address 16 S LEXINGTON ST			<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2017"/>
City ARLINGTON	State VA	Zip Code 22204-1145	Transaction ID : SA11A.500800
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer (for Individual) BGR GROUP		Occupation (for Individual) CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="7650.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 419 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONGORIA, RICKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1950 PANEDES LN
 City BROWNSVILLE State TX Zip Code 78521-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BURTON MCCUMBER & CORTEZ Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 21 / 2017
Transaction ID : SA11A.511864
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. LOPER, BRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4551 32ND ROAD N
 City ARLINGTON State VA Zip Code 22207-4466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN EXPRESS Occupation (for Individual) SENIOR VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.502284
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. LOPER, GINGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4551 32ND ROAD N
 City ARLINGTON State VA Zip Code 22207-4466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOPER CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506487
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	16000.00
TOTAL This Period (last page this line number only).....	

**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 420 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOPP, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3225 LOUISE AVE
 City DODGE CITY State KS Zip Code 67801-6513
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.503271
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LOPP, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3225 LOUISE AVE
 City DODGE CITY State KS Zip Code 67801-6513
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2017
Transaction ID : SA11A.506728
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LOPP, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3225 LOUISE AVE
 City DODGE CITY State KS Zip Code 67801-6513
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2017
Transaction ID : SA11A.512705
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 421 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LORD, CARLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1878 ALZOLA DR.

City BOISE	State ID	Zip Code 83716-3404
---------------	----------	------------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		17		2017

Transaction ID : SA11A.502334

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LORD, CARLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1878 ALZOLA DR.

City BOISE	State ID	Zip Code 83716-3404
---------------	----------	------------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : SA11A.503078

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. LORD, CARLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1878 ALZOLA DR.

City BOISE	State ID	Zip Code 83716-3404
---------------	----------	------------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2017

Transaction ID : SA11A.505838

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 422 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LORD, CARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1878 ALZOLA DR.
 City BOISE State ID Zip Code 83716-3404
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512814
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LOTHIAN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 76 ST
 City BROOKLYN State NY Zip Code 11209-3326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SETON HALL UNIVERSITY Occupation (for Individual) PROFESSOR
 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
 04 / 21 / 2017
Transaction ID : SA11A.502878
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LOTHIAN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 76 ST
 City BROOKLYN State NY Zip Code 11209-3326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SETON HALL UNIVERSITY Occupation (for Individual) PROFESSOR
 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
 05 / 21 / 2017
Transaction ID : SA11A.506331
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**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 423 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOTHIAN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 76 ST
 City BROOKLYN State NY Zip Code 11209-3326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SETON HALL UNIVERSITY Occupation (for Individual) PROFESSOR
 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
 06 / 21 / 2017
Transaction ID : SA11A.512242
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 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
 04 / 24 / 2017
Transaction ID : SA11A.503092
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 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
 05 / 24 / 2017
Transaction ID : SA11A.506521
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 424 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 24 / 2017
Transaction ID : SA11A.512728
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOUIS, SONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99-40 213TH STREET
 City QUEENS VILLAGE State NY Zip Code 11429-1152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11A.500515
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LOUIS, SONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99-40 213TH STREET
 City QUEENS VILLAGE State NY Zip Code 11429-1152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505643
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 425 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOUIS, SONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99-40 213TH STREET
 City QUEENS VILLAGE State NY Zip Code 11429-1152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512534
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOVE, FRANK, C., , IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10601 N PENNSYLVANIA AVE
 City OKLAHOMA CITY State OK Zip Code 73120-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOVE'S TRAVEL STOP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508982
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. LOVE, GREGORY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10601 N PENNSYLVANIA AVE
 City OKLAHOMA CITY State OK Zip Code 73120-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOVE'S TRAVEL STOP Occupation (for Individual) CO-CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508984
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5100.00
TOTAL This Period (last page this line number only).....	

**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 426 OF 1054
	<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	

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)
Team Ryan

A. LOVE, JUDITH, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10601 N PENNSYLVANIA AVE
 City OKLAHOMA CITY State OK Zip Code 73120-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOVE'S TRAVEL STOP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508983
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. LOVETT, WILLIAM, E., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7455 PRINCETON TRACE
 City ATLANTA State GA Zip Code 30328-1045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 02 / 2017
Transaction ID : SA11A.504171
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. LOWE, KENNETH, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9721 SHERRILL BLVD
 City KNOXVILLE State TN Zip Code 37932-3330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512293
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00
TOTAL This Period (last page this line number only)..... ▶

**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 427 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LU, XINZHAN, , ,

Mailing Address **8150 E GARVEY AVE**
115A

City **ROSEMEAD** State **CA** Zip Code **91770-2472**

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 ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2017

Transaction ID : SA11A.501054

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LU, XINZHAN, , ,

Mailing Address **8150 E GARVEY AVE**
115A

City **ROSEMEAD** State **CA** Zip Code **91770-2472**

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 ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2017

Transaction ID : SA11A.504302

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LU, XINZHAN, , ,

Mailing Address **8150 E GARVEY AVE**
115A

City **ROSEMEAD** State **CA** Zip Code **91770-2472**

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 ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2017

Transaction ID : SA11A.508768

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 428 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUCAS, FORREST, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 N SHERIDAN ST
 City CORONA State CA Zip Code 92880-2067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUCAS OIL PRODUCTS Occupation (for Individual) FOUNDER, PRESIDENT, AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 20 / 2017
Transaction ID : SA11A.502675
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. LUCAS, HARRY, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 327 CONGRESS AVENUE
 City AUSTIN State TX Zip Code 78701-4058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUCAS PETROLEUM GROUP INC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512178
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. LUDDY, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4641 PARAGON PARK RD
 City RALEIGH State NC Zip Code 27616-3406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPTIVE AIRE SYSTEMS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504316
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 37700.00
TOTAL This Period (last page this line number only)..... ▶

**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 429 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUKACS, LASZLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24700 GRAND TRAVERSE AV
 City BROWNSTOWN State MI Zip Code 48134-8055
 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 ▼ 600.00

Date of Receipt 04 / 18 / 2017
Transaction ID : SA11A.502558
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LUKACS, LASZLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24700 GRAND TRAVERSE AV
 City BROWNSTOWN State MI Zip Code 48134-8055
 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 ▼ 600.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.505885
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LUKACS, LASZLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24700 GRAND TRAVERSE AV
 City BROWNSTOWN State MI Zip Code 48134-8055
 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 ▼ 600.00

Date of Receipt 06 / 18 / 2017
Transaction ID : SA11A.511743
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 430 OF 1054
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUNDY, WILLIAM, L., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 NORTHSIDE DR
 City CEDARTOWN State GA Zip Code 30125-2226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARKER AND LUNDY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508989
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. M<CCARTHY, PATRICK, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47802 270TH ST
 City SIOUX FALLS State SD Zip Code 57108-8223
 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 ▼ 600.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502875
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. M<CCARTHY, PATRICK, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47802 270TH ST
 City SIOUX FALLS State SD Zip Code 57108-8223
 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 ▼ 600.00

Date of Receipt 05 / 21 / 2017
Transaction ID : SA11A.506326
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**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 431 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. M<CCARTHY, PATRICK, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47802 270TH ST
 City SIOUX FALLS State SD Zip Code 57108-8223
 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 ▼ 600.00

Date of Receipt 06 / 21 / 2017
Transaction ID : SA11A.512238
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MACARI, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 DIAMOND HILL ROAD
 City CUMBERLAND State RI Zip Code 02864-2915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MACARI DEVELOPMENT, INC. Occupation (for Individual) COMMERCIAL REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501359
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MACARI, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 DIAMOND HILL ROAD
 City CUMBERLAND State RI Zip Code 02864-2915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MACARI DEVELOPMENT, INC. Occupation (for Individual) COMMERCIAL REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11A.505354
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**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 432 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACARI, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 DIAMOND HILL ROAD
 City CUMBERLAND State RI Zip Code 02864-2915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MACARI DEVELOPMENT, INC. Occupation (for Individual) COMMERCIAL REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 10 / 2017
Transaction ID : SA11A.510077
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MACDOUGAL, GARY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 N LAKE SHORE DRIVE APT. 3611
 City CHICAGO State IL Zip Code 60611-6428
 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 ▼ 1000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507904
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MACDONALD, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4017 KILMARTIN DRIVE
 City TALLAHASSEE State FL Zip Code 32309-2861
 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 ▼ 400.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503750
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1280.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 433 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MACDONALD, JUNE, , ,

Mailing Address **4017 KILMARTIN DRIVE**

City **TALLAHASSEE** State **FL** Zip Code **32309-2861**

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 ▼ **400.00**

Date of Receipt
05 / 16 / 2017
Transaction ID : SA11A.504832

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MACDONALD, JUNE, , ,

Mailing Address **4017 KILMARTIN DRIVE**

City **TALLAHASSEE** State **FL** Zip Code **32309-2861**

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 ▼ **400.00**

Date of Receipt
05 / 28 / 2017
Transaction ID : SA11A.507448

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MACDONALD, JUNE, , ,

Mailing Address **4017 KILMARTIN DRIVE**

City **TALLAHASSEE** State **FL** Zip Code **32309-2861**

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 ▼ **400.00**

Date of Receipt
06 / 16 / 2017
Transaction ID : SA11A.510658

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

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

**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 434 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACDONALD, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4017 KILMARTIN DRIVE

City TALLAHASSEE State FL Zip Code 32309-2861

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 ▼ 400.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513184

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

B. MACEY, HARRY, B., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1957

City TEMPLE State TX Zip Code 76503-1957

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PERRY OFFICE PLUS Occupation (for Individual) SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506095

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

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

Mailing Address 1338W. 4800S

City TAYLORSVILLE State UT Zip Code 84123-4323

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 ▼ 335.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500733

Amount of Each Receipt this Period 35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2565.00

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

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

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

FOR LINE NUMBER: PAGE 435 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MACKAY, C, , ,
 Mailing Address 1338W. 4800S
 City TAYLORSVILLE State UT Zip Code 84123-4323
 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 ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503552
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MACKAY, C, , ,
 Mailing Address 1338W. 4800S
 City TAYLORSVILLE State UT Zip Code 84123-4323
 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 ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503850
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MACKAY, C, , ,
 Mailing Address 1338W. 4800S
 City TAYLORSVILLE State UT Zip Code 84123-4323
 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 ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2017
Transaction ID : SA11A.507842
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**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 436 OF 1054
	<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)
Team Ryan

A. MACKAY, C, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1338W. 4800S

City TAYLORSVILLE	State UT	Zip Code 84123-4323
----------------------	-------------	------------------------

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 ▼
335.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2017

Transaction ID : SA11A.508108

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. MACY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5131 STAVERLY LANE

City PEACHTREE CORNERS	State GA	Zip Code 30092-1786
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION BUILDERS	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
04 / 26 / 2017

Transaction ID : SA11A.503406

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MACY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5131 STAVERLY LANE

City PEACHTREE CORNERS	State GA	Zip Code 30092-1786
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION BUILDERS	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2017

Transaction ID : SA11A.506863

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**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 437 OF 1054
	<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	

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)
Team Ryan

A. MACY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5131 STAVERLY LANE

City PEACHTREE CORNERS	State GA	Zip Code 30092-1786
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION BUILDERS	Occupation (for Individual) SALES
---	--------------------------------------

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
06		26		2017

Transaction ID : SA11A.512655

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MAHAN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 GRANDVIEW DRIVE

City PALM COAST	State FL	Zip Code 32137-1488
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : SA11A.503968

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MAHAN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 GRANDVIEW DRIVE

City PALM COAST	State FL	Zip Code 32137-1488
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2017

Transaction ID : SA11A.504114

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 438 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAHAN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 GRANDVIEW DRIVE

City PALM COAST	State FL	Zip Code 32137-1488
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2017

Transaction ID : SA11A.507312

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MAKRIS, GEORGE, A., , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 W 46TH 7 HARBOR DELL

City PINE BLUFF	State AR	Zip Code 71603-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMMENS FIRST NATIONAL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
04 / 10 / 2017

Transaction ID : SA11A.501331

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. MANCUSO, ADAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 811 SOUTH RIDGE RD

City LAKE FOREST	State IL	Zip Code 60045-2755
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAKE FOREST SPORTSCARS	Occupation (for Individual) AUTO DEALER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2017

Transaction ID : SA11A.508251

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10525.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 439 OF 1054
(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)
Team Ryan

A. MANDELBLATT, ERIC, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 444 MADISON AVE 21ST FL

City NEW YORK	State NY	Zip Code 10022-6962
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOROBAN CAPITAL PARTNERS	Occupation (for Individual) MANAGING PARTNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2017

Transaction ID : SA11A.504200

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. MANLEY, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2230 MINERVA COURT

City LIVERMORE	State CA	Zip Code 94550-8282
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHALA DATA	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
04 / 28 / 2017

Transaction ID : SA11A.503764

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. MANLEY, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2230 MINERVA COURT

City LIVERMORE	State CA	Zip Code 94550-8282
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHALA DATA	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2017

Transaction ID : SA11A.507485

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25150.00
TOTAL This Period (last page this line number only).....	

**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 440 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANLEY, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2230 MINERVA COURT
 City LIVERMORE State CA Zip Code 94550-8282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHALA DATA Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2017
Transaction ID : SA11A.513231
 Amount of Each Receipt this Period
 75.00
 Memo Item
CONTRIBUTION

B. MANN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 E. CANAL DRIVE
 City TURLOCK State CA Zip Code 95380-4159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANN ELECTRIC, INC. Occupation (for Individual) ELECTRICAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2017
Transaction ID : SA11A.501941
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. MANN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 E. CANAL DRIVE
 City TURLOCK State CA Zip Code 95380-4159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANN ELECTRIC, INC. Occupation (for Individual) ELECTRICAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2017
Transaction ID : SA11A.505747
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**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 441 OF 1054
	<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)
Team Ryan

A. MANN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 E. CANAL DRIVE
 City TURLOCK State CA Zip Code 95380-4159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANN ELECTRIC, INC. Occupation (for Individual) ELECTRICAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2017
Transaction ID : SA11A.510608
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MANN, MARY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 QUEEN ST
 City ALEXANDRIA State VA Zip Code 22314-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNATIONAL PAPER Occupation (for Individual) GOVERNMENT RELATIONS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502968
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. MANN, MARY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 QUEEN ST
 City ALEXANDRIA State VA Zip Code 22314-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNATIONAL PAPER Occupation (for Individual) GOVERNMENT RELATIONS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512050
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5050.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 442 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MANNING, ELLIS, W., MR., JR		Date of Receipt MM / DD / YYYY 05 / 30 / 2017
Mailing Address 300 DEER VALLEY ROAD APT # 1E		Transaction ID : SA11A.508695
City SAN RAFAEL	State CA	Zip Code 94903-5514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MANNING, ELLIS, W., MR., JR		Date of Receipt MM / DD / YYYY 06 / 20 / 2017
Mailing Address 300 DEER VALLEY ROAD APT # 1E		Transaction ID : SA11A.511492
City SAN RAFAEL	State CA	Zip Code 94903-5514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MANNING, JOHN, , ,		Date of Receipt MM / DD / YYYY 04 / 06 / 2017
Mailing Address 4514 DREW CT		Transaction ID : SA11A.501203
City LAKELAND	State FL	Zip Code 33811-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) GENERTEK POWER INDUSTRIES	Occupation (for Individual) BUSINESS MANAGER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 443 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANNING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 DREW CT
 City LAKELAND State FL Zip Code 33811-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERTEK POWER INDUSTRIES Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.503211
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MANNING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 DREW CT
 City LAKELAND State FL Zip Code 33811-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERTEK POWER INDUSTRIES Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2017
Transaction ID : SA11A.505317
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MANNING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 DREW CT
 City LAKELAND State FL Zip Code 33811-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERTEK POWER INDUSTRIES Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2017
Transaction ID : SA11A.507699
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**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 444 OF 1054
	<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)
Team Ryan

A. MANNING, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4514 DREW CT
City LAKELAND State FL Zip Code 33811-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) GENERTEK POWER INDUSTRIES Occupation (for Individual) BUSINESS MANAGER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2017
Transaction ID : SA11A.509308
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MANOCHERIAN, JED, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 18 E 50TH ST
City NEW YORK State NY Zip Code 10022-6817
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) WOODBRANCH INVESTMENTS Occupation (for Individual) REAL ESTATE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504314
Amount of Each Receipt this Period 40000.00
 Memo Item CONTRIBUTION

C. MARCUCCILLI, JAMES, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 534 CHESTNUT FOREST COVE
City FORT WAYNE State IN Zip Code 46814-8927
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) STAR FINANCIAL BANK Occupation (for Individual) BANKER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504689
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 40550.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 445 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARDAK, KEITH, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2743 NORTH LAKE DR.

City MILWAUKEE	State WI	Zip Code 53211-3851
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HAL LEONARD CORPORATION	Occupation (for Individual) CHAIRMAN-CEO
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2017

Transaction ID : SA11A.504859

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. MARIEL, MICHAEL, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 228 HARVARD AVE

City TERRACE PARK	State OH	Zip Code 45174-1112
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EMPIRE BAKERY COMMISARY	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11A.504494

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. MARJAN, ROBERT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1222 CHAMPION FOREST CT

City WHEATON	State IL	Zip Code 60187-3046
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		13		2017

Transaction ID : SA11A.501620

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

**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 446 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARKHAM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15180 W. 50TH DR.
 City GOLDEN State CO Zip Code 80403-1542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOUNCE INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 06 / 2017
Transaction ID : SA11A.501202
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. MARKHAM, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 SAXONY BLVD.
 City ST PETERSBURG State FL Zip Code 33716-1284
 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 04 / 13 / 2017
Transaction ID : SA11A.501706
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION
 REFUNDED \$100.00 ON 05/18/2017

C. MARKHAM, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3829 KINROSS DRIVE
 City BIRMINGHAM State AL Zip Code 35242-5803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN COMPANY SERVICES, INC Occupation (for Individual) RISK MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503749
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**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 447 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARKSTEIN, TRAVIS, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1087
 City SAN MARCOS State CA Zip Code 92079-1087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKSTEIN BEVERAGE CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.506018
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. MARRA, THOMAS, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 NE BAY ISLE DR
 City BOCA RATON State FL Zip Code 33487-1731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510557
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MARRELLA, AMEY, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4065
 City WOODBRIDGE State CT Zip Code 06525-0065
 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 ▼ 250.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11A.502905
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5750.00
TOTAL This Period (last page this line number only).....	

**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 448 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, EDWARD, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 WOODBERRY ROAD
 City NEW KENSINGTON State PA Zip Code 15068-5308
 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 ▼ 700.00

Date of Receipt 05 / 25 / 2017
Transaction ID : SA11A.506135
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. MARTIN, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6221 ANDREW CT
 City LINCOLN State NE Zip Code 68512-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERITAS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2017
Transaction ID : SA11A.509453
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MARTINI, SHADIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30202 INKSTER RD
 City FRANKLIN State MI Zip Code 48025-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507925
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	

**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 449 OF 1054
	<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)
Team Ryan

A. MARX, RICHARD, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 440

City WAPPINGERS FALLS State NY Zip Code 12590-0440

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 ▼ 250.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11A.505007

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. MASSEE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6221 CENTURY HILL DR.

City RIVERSIDE State CA Zip Code 92506-4666

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RIVERSIDE RADIOLOGY Occupation (for Individual) RADIOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507499

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. MASSMAN, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5508 TANBARK ROAD

City DALLAS State TX Zip Code 75229-5559

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510680

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

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

FOR LINE NUMBER: PAGE 450 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATESICH, JAMES, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 ONNEN COURT
 City GRANVILLE State OH Zip Code 43023-8000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATESICH DISTRIBUTING COMPANY Occupation (for Individual) BEER DISTRIBUTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513021
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. MATHAS, THEODORE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 CARRIAGE TRL
 City TARRYTOWN State NY Zip Code 10591-6306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK LIFE Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510554
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MATOVINA, JOHN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6524 NW 93RD ST
 City JOHNSTON State IA Zip Code 50131-2954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN EQUITY INVESTMENT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510562
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6500.00
TOTAL This Period (last page this line number only)..... ▶

**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 451 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATTHEWS, KADE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO DRAWER 1170
 City CLARENDON State TX Zip Code 79226-1170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508987
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

B. MATTOON, JANE, GARVEY, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6344 CAVALIER CORRIDOR
 City FALLS CHURCH State VA Zip Code 22044-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506046
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. MAURAN, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PARSONAGE STREET
 City PROVIDENCE State RI Zip Code 02903-4732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANK MAURAN Occupation (for Individual) PRINTING/SHIPPING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2017
Transaction ID : SA11A.502386
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7950.00
TOTAL This Period (last page this line number only).....▶	

**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 452 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAURAN, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PARSONAGE STREET
 City PROVIDENCE State RI Zip Code 02903-4732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANK MAURAN Occupation (for Individual) PRINTING/SHIPPING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.505588
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. MAURAN, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PARSONAGE STREET
 City PROVIDENCE State RI Zip Code 02903-4732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANK MAURAN Occupation (for Individual) PRINTING/SHIPPING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.511153
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. MAXIM, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 HUNT RD
 City RADNOR State PA Zip Code 19008-1525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXIM AUTOMOTIVE Occupation (for Individual) EXECUTIVE
 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
 04 / 29 / 2017
Transaction ID : SA11A.504109
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**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 453 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXIM, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 HUNT RD
 City RADNOR State PA Zip Code 19008-1525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXIM AUTOMOTIVE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 29 / 2017
Transaction ID : SA11A.507544
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MAXIM, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 HUNT RD
 City RADNOR State PA Zip Code 19008-1525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXIM AUTOMOTIVE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513290
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MAXWELL, H., G., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 10009
 City GOLDSBORO State NC Zip Code 27532-0009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENSBORO MILLING CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505676
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

**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 454 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXWELL, JAMES, LOUIS, MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 10009
 City GOLDSBORO State NC Zip Code 27532-0009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENSBORO MILLING COMPANY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.505677
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. MAXWELL, THOMAS, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 BARKADA RD
 City MONTICELLO State AR Zip Code 71655-9276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXWELL HARDWOOD Occupation (for Individual) SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : SA11A.504333
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. MAYBERRY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2923 ROCKBROOK DRIVE
 City CHARLOTTE State NC Zip Code 28211-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCGUIRE WOODS, LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2017
Transaction ID : SA11A.501702
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 455 OF 1054
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYBERRY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2923 ROCKBROOK DRIVE
 City CHARLOTTE State NC Zip Code 28211-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCGUIRE WOODS, LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 13 / 2017
Transaction ID : SA11A.505760
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MAYBERRY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2923 ROCKBROOK DRIVE
 City CHARLOTTE State NC Zip Code 28211-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCGUIRE WOODS, LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 13 / 2017
Transaction ID : SA11A.510263
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MAYES, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3730 CARLEY RD
 City SPRINGDALE State AR Zip Code 72762-7304
 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 ▼ 250.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11A.508026
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**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 456 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYS, L., LOWRY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 W NOTTINGHAM DR STE 400
 City SAN ANTONIO State TX Zip Code 78209-1958
 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 ▼ 33400.00

Date of Receipt
 06 / 07 / 2017
Transaction ID : SA11A.508855
 Amount of Each Receipt this Period
 33400.00
 Memo Item
 CONTRIBUTION

B. MAYS, MARK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 W NOTTINGHAM STE 400
 City SAN ANTONIO State TX Zip Code 78209-1958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROCKING M CAPITAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 06 / 22 / 2017
Transaction ID : SA11A.512054
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. MAZE, NANCY, CHADBOURNE, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1710 2ND STREET
 City PERU State IL Zip Code 61354-3302
 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 ▼ 450.00

Date of Receipt
 06 / 12 / 2017
Transaction ID : SA11A.509513
 Amount of Each Receipt this Period
 450.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	38850.00
TOTAL This Period (last page this line number only).....	

**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 457 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCARTHUR, A. SHIRLEY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 19TH STREET NE
 City EAST WENATCHEE State WA Zip Code 98802-4277
 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 ▼ 900.00

Date of Receipt **04 / 18 / 2017**
Transaction ID : SA11A.502264
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCCARTY, CHARLES, EMMETT, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 409 SHADOWOOD DRIVE
 City MARSHALL State TX Zip Code 75672-1317
 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 ▼ 300.00

Date of Receipt **05 / 09 / 2017**
Transaction ID : SA11A.504594
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCCAWE, CRAIG, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 CARILOONG POINT
 City KIRKLAND State WA Zip Code 98033-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EAGLE RIVER Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 41950.00

Date of Receipt **04 / 25 / 2017**
Transaction ID : SA11A.502904
 Amount of Each Receipt this Period 41950.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	42150.00
TOTAL This Period (last page this line number only).....	

**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 458 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCAWE, SUSAN, R., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 CARILONG POINT
 City KIRKLAND State WA Zip Code 98033-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COM INVESTMENTS LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8050.00

Date of Receipt **04 / 25 / 2017**
Transaction ID : SA11A.502902
 Amount of Each Receipt this Period 8050.00
 Memo Item CONTRIBUTION

B. MCCOMBS, RED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 755 E MULBERRY AVENUE
 City SAN ANTONIO State TX Zip Code 78212-3129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **06 / 07 / 2017**
Transaction ID : SA11A.508977
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

C. MCCUTCHEN, JOEY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1622 NORTH B STREET
 City FORT SMITH State AR Zip Code 72901-3236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 07 / 2017**
Transaction ID : SA11A.508972
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10550.00
TOTAL This Period (last page this line number only).....	

**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 459 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDANOLDS, RICHARD, G.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 275

City NORTH HAVERHILL	State NH	Zip Code 03774-0275
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
MM / DD / YYYY
06 / 20 / 2017
Transaction ID : SA11A.511360

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MCDOUGALL, JEFFREY, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14400 GAILLARDIA LANE

City OKLAHOMA CITY	State OK	Zip Code 73142-1872
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) JMA ENERGY CO	Occupation (for Individual) PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Date of Receipt
MM / DD / YYYY
06 / 12 / 2017
Transaction ID : SA11A.509447

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. MCEWEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6113 DESERT HILLS AVENUE

City BAKERSFIELD	State CA	Zip Code 93309-2562
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE BROKER/APPRaiser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
MM / DD / YYYY
05 / 22 / 2017
Transaction ID : SA11A.506423

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 460 OF 1054
(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)
Team Ryan

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

Mailing Address 6113 DESERT HILLS AVENUE

City BAKERSFIELD	State CA	Zip Code 93309-2562
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE BROKER/APPRAISER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2017

Transaction ID : SA11A.506424

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MCEWEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6113 DESERT HILLS AVENUE

City BAKERSFIELD	State CA	Zip Code 93309-2562
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE BROKER/APPRAISER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 06 / 2017

Transaction ID : SA11A.509319

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MCEWEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6113 DESERT HILLS AVENUE

City BAKERSFIELD	State CA	Zip Code 93309-2562
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE BROKER/APPRAISER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 06 / 2017

Transaction ID : SA11A.509320

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 461 OF 1054
	<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)
Team Ryan

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

Mailing Address 6113 DESERT HILLS AVENUE

City BAKERSFIELD	State CA	Zip Code 93309-2562
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE BROKER/APPRaiser
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2017

Transaction ID : SA11A.509480

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MCEWEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6113 DESERT HILLS AVENUE

City BAKERSFIELD	State CA	Zip Code 93309-2562
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE BROKER/APPRaiser
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2017

Transaction ID : SA11A.509481

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MCFARREN, NEIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3651 E. MCEWEN DR.

City FRANKLIN	State TN	Zip Code 37067-5796
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2017

Transaction ID : SA11A.503110

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 462 OF 1054
<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)
Team Ryan

A. MCFARREN, NEIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3651 E. MCEWEN DR.

City FRANKLIN	State TN	Zip Code 37067-5796
------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : SA11A.506276

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MCFARREN, NEIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3651 E. MCEWEN DR.

City FRANKLIN	State TN	Zip Code 37067-5796
------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2017

Transaction ID : SA11A.512267

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MCGINLEY, MATT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2503-D HARRISON STREET NORTH , #12
#1210

City ARLINGTON	State VA	Zip Code 22207-1640
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADVANCED POLICY CONSULTING, LLC	Occupation (for Individual) PRINCIPAL
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

Transaction ID : SA11A.513553

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGRAW, KYLE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3004 BLUEBIRD LANE
 City MIDLAND State TX Zip Code 79705-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEGACY RESERVES Occupation (for Individual) PET. ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508985
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. MCGRATH, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 KLINGLE ST. NW
 City WASHINGTON State DC Zip Code 20016-3576
 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 ▼ 600.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.501232
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCGRATH, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 KLINGLE ST. NW
 City WASHINGTON State DC Zip Code 20016-3576
 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 ▼ 600.00

Date of Receipt 06 / 13 / 2017
Transaction ID : SA11A.510239
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5350.00
TOTAL This Period (last page this line number only)..... ▶

**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 464 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGUINNESS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 BRIARDALE COURT
 City FAIRVIEW State TX Zip Code 75069-1592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEL EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 09 / 2017
Transaction ID : SA11A.501408
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MCINERNEY, THOMAS, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 MANITOU CT
 City WESTPORT State CT Zip Code 06880-6006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUFF POINT Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244000.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506594
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. MCINERNEY, THOMAS, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1235 HYDE LANE
 City HENRICO State VA Zip Code 23229-6064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENWORTH FINANCIAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510560
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	102950.00
TOTAL This Period (last page this line number only).....▶	

**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 465 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCINTYRE, NOBLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8601 SOUTH WESTERN AVE
 City OKLAHOMA CITY State OK Zip Code 73139-9200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCINTYRE LAW PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.508252
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. MCINTYRE, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1702 COLGATE CIRCLE
 City LA JOLLA State CA Zip Code 92037-6908
 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 ▼ 300.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502874
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCINTYRE, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1702 COLGATE CIRCLE
 City LA JOLLA State CA Zip Code 92037-6908
 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 ▼ 300.00

Date of Receipt 05 / 21 / 2017
Transaction ID : SA11A.506295
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2600.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 466 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCINTYRE, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1702 COLGATE CIRCLE
 City LA JOLLA State CA Zip Code 92037-6908
 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 ▼ 300.00

Date of Receipt 06 / 21 / 2017
Transaction ID : SA11A.512211
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCKEITHAN, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 E WISCONSIN AVENUE SUITE 3020
 City MILWAUKEE State WI Zip Code 53202-5302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAMARACK PETROLEUM CO INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504644
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. MCKENNA, PATRICK, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1551 MOON VALLEY LANE
 City CINCINNATI State OH Zip Code 45230-1319
 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 ▼ 300.00

Date of Receipt 05 / 01 / 2017
Transaction ID : SA11A.503671
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25350.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 467 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLAUGHLIN, DAVID, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11113 BLUE STEM DRIVE
 City OKLAHOMA CITY State OK Zip Code 73162-4942
 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 ▼ 250.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11A.500483
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MCLAUGHLIN, DUGAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5246 BENT RIVER BLVD
 City KNOXVILLE State TN Zip Code 37919-9350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 25 / 2017
Transaction ID : SA11A.506576
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. MCMANUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2082 GRACE MANOR CT
 City MCLEAN State VA Zip Code 22101-4900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCMANUS GROUP Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 18 / 2017
Transaction ID : SA11A.502280
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 12750.00
TOTAL This Period (last page this line number only)..... ▶

**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 468 OF 1054
	<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)
Team Ryan

A. MCMORROW, LESLIE, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 151 S EL CAMINO DR

City BEVERLY HILLS	State CA	Zip Code 90212-2704
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

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
04		25		2017

Transaction ID : SA11A.502972

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. MCMORROW, WILLIAM, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 151 S EL CAMINO DR

City BEVERLY HILLS	State CA	Zip Code 90212-2704
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENNEDY WILSON	Occupation (for Individual) CEO
---	------------------------------------

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
04		25		2017

Transaction ID : SA11A.502971

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. MCNAMEE, PHIL, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2400 MAIN STREET

City IRVINE	State CA	Zip Code 92614-6252
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE INVESTMENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2017

Transaction ID : SA11A.503313

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 469 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNEAR, DENMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8300 BURDETTE ROAD APT 750
 City BETHESDA State MD Zip Code 20817-2837
 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 ▼ 525.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511824
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MCNEILL, RONALD, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 MAGNOLIA DRIVE
 City WILMINGTON State NC Zip Code 28409-2800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY HEALTHCARE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.502323
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

C. MCNULTY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10981 KEYMAR DRIVE
 City LAS VEGAS State NV Zip Code 89135-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPINE SURGEON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.503219
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

**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 470 OF 1054
	<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)
Team Ryan

A. MCNULTY, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10981 KEYMAR DRIVE

City LAS VEGAS	State NV	Zip Code 89135-1718
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SPINE SURGEON
--	--

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
06		11		2017

Transaction ID : SA11A.510024

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MCRAE, JAMES, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 557 SE VISTA DRIVE

City NEWPORT	State OR	Zip Code 97365-4210
-----------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2017

Transaction ID : SA11A.511373

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. MCWHORTER, AARON, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1487 BLACK DIRT ROAD

City WHITESBURG	State GA	Zip Code 30185-2723
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11A.505674

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5550.00
TOTAL This Period (last page this line number only).....	

**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 471 OF 1054		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEADE, EDWIN, B., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 WESTBROOK COURT
 APT 3144
 City RICHMOND State VA Zip Code 23227-3373
 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 ▼ 550.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501543
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MEADE, EDWIN, B., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 WESTBROOK COURT
 APT 3144
 City RICHMOND State VA Zip Code 23227-3373
 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 ▼ 550.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505639
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MEADE, EDWIN, B., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 WESTBROOK COURT
 APT 3144
 City RICHMOND State VA Zip Code 23227-3373
 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 ▼ 550.00

Date of Receipt 06 / 13 / 2017
Transaction ID : SA11A.509813
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 472 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEADE, EDWIN, B., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 WESTBROOK COURT
 APT 3144
 City RICHMOND State VA Zip Code 23227-3373
 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 ▼ 550.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511263
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. MEADE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5605 N CLASSEN BOULEVARD
 City OKLAHOMA CITY State OK Zip Code 73118-4015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEADE ENERGY CO Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501554
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MEIN, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 SANCTUARY DR.
 City SAN ANTONIO State TX Zip Code 78248-1666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETINAL CONSULTANTS OF SAN ANTONIO Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503975
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**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 473 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEIN, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 SANCTUARY DR.
 City SAN ANTONIO State TX Zip Code 78248-1666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETINAL CONSULTANTS OF SAN ANTONIO Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11A.508656
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MEIN, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 SANCTUARY DR.
 City SAN ANTONIO State TX Zip Code 78248-1666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETINAL CONSULTANTS OF SAN ANTONIO Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513661
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MEISTER, DAVID, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9700 WEST BLUEMOUND
 City MILWAUKEE State WI Zip Code 53226-4462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.504858
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

**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 474 OF 1054
	<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)
Team Ryan

A. MEISTER, KEITH, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 176 E 75TH ST

City NEW YORK	State NY	Zip Code 10021-3228
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) HEDGE FUND MANAGER
--	---

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
05		08		2017

Transaction ID : SA11A.504331

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. MENDELSON, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 E 66TH ST

City NEW YORK	State NY	Zip Code 10065-6451
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AQR CAPITAL	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2017

Transaction ID : SA11A.507897

Amount of Each Receipt this Period
10400.00

Memo Item
CONTRIBUTION

C. MERCALDO, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 42 MAIN STREET

City DANBURY	State CT	Zip Code 06810-3001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MMB,CPAPC	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2017

Transaction ID : SA11A.501498

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	35500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 475 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERCALDO, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 MAIN STREET
 City DANBURY State CT Zip Code 06810-3001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MMB,CPAPC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11A.505381
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. MERCALDO, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 MAIN STREET
 City DANBURY State CT Zip Code 06810-3001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MMB,CPAPC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 11 / 2017
Transaction ID : SA11A.510056
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. MERCER, DIANA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 ROUTE 25A
 City EAST SETAUKET State NY Zip Code 11733-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 247700.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11A.501474
 Amount of Each Receipt this Period 247700.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 247900.00
TOTAL This Period (last page this line number only)..... ▶

**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 476 OF 1054
	<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)
Team Ryan

A. MERCER, ROBERT, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 600 ROUTE 25A

City EAST SETAUKET	State NY	Zip Code 11733-1235
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RENAISSANCE TECHNOLOGIES	Occupation (for Individual) FINANCIAL CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2017

Transaction ID : SA11A.501475

Amount of Each Receipt this Period
247700.00

Memo Item
CONTRIBUTION

B. MEYER, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3 FOX HOLLOW ROAD

City OXFORD	State CT	Zip Code 06478-3162
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CED SERVICES INC	Occupation (for Individual) CEO
---	------------------------------------

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
05		16		2017

Transaction ID : SA11A.505251

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MIDDLETON, STEVEN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 42 CHENAL CIR

City LITTLE ROCK	State AR	Zip Code 72223-9566
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEPHENS	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504704

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	248450.00
TOTAL This Period (last page this line number only).....	

**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 477 OF 1054
	<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)
Team Ryan

A. MILAM, JOAN, G., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2673 CENTER COURT DRIVE

City WESTON	State FL	Zip Code 33332-1833
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2017

Transaction ID : SA11A.505655

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MILAM, JOAN, G., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2673 CENTER COURT DRIVE

City WESTON	State FL	Zip Code 33332-1833
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2017

Transaction ID : SA11A.511282

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. MILLETT, MARK, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 822 PHAETON WAY

City AUBURN	State IN	Zip Code 46706-1341
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEEL DYNAMICS INC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504696

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

**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 478 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, VAIL, K., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3840 STONEBRIDGE RD
 City DAYTON State OH Zip Code 45419-1134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEIDELBERG DISTRIBUTING CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507912
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MILLS, SANDRA, R., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 RUE REYNARD ST
 City MENASHA State WI Zip Code 54952-2946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHD RESEARCHER IN EDUCATION
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506592
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. MINTON, BARBARA, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2117 WHITE FOX WAY
 City GLEN MILLS State PA Zip Code 19342-2256
 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 ▼ 235.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503301
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10550.00
TOTAL This Period (last page this line number only).....	

**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 479 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MINTON, BARBARA, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2117 WHITE FOX WAY
 City GLEN MILLS State PA Zip Code 19342-2256
 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 ▼ 235.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511137
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MINTON, BARBARA, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2117 WHITE FOX WAY
 City GLEN MILLS State PA Zip Code 19342-2256
 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 ▼ 235.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512741
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MIRSKY, CYNTHIA, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25331 DERBYHILL DRIVE
 City LAGUNA HILLS State CA Zip Code 92653-7836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC RIM CAPITAL Occupation (for Individual) CO-OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510644
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MISHU, SAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11235 W. POINT DR. STE. 1
 City KNOXVILLE State TN Zip Code 37934-2827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M&M DEVELOPMENT CO Occupation (for Individual) REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508941
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. MISKA, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 THIRD STREET
 City LAKE OSWEGO State OR Zip Code 97034-2349
 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 ▼ 600.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.502366
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MISKA, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 THIRD STREET
 City LAKE OSWEGO State OR Zip Code 97034-2349
 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 ▼ 600.00

Date of Receipt 05 / 17 / 2017
Transaction ID : SA11A.505856
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 481 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MISKA, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 745 THIRD STREET

City LAKE OSWEGO	State OR	Zip Code 97034-2349
---------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2017

Transaction ID : SA11A.511772

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MITCHELL, FRANK, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36 WALNUT COURT LANE

City MEMPHIS	State TN	Zip Code 38111-6100
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2017

Transaction ID : SA11A.504330

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. MOAVENI, KHOSROW, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4099 TAMIAMI TRAIL N STE 200

City NAPLES	State FL	Zip Code 34103-3548
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FMDC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : SA11A.506028

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12600.00
TOTAL This Period (last page this line number only).....	

**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 482 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MODJARRAD, SEAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 W SPRING VALLEY RD
 City RICHARDSON State TX Zip Code 75081-4034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAS LAW FIRM Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.509047
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. MOIX, DAVID, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6215 GREENWOOD
 City LITTLE ROCK State AR Zip Code 72207-1842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504707
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MOLINA, RUSSELL, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5906 DOLORES APT 225
 City HOUSTON State TX Zip Code 77057-5657
 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 ▼ 5000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513029
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10500.00
TOTAL This Period (last page this line number only).....▶	

**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 483 OF 1054
	<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)
Team Ryan

A. MONAHAN, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6084 EAGLE TRACE LANE
 City BANNING State CA Zip Code 92220-5488
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503404
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MONAHAN, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6084 EAGLE TRACE LANE
 City BANNING State CA Zip Code 92220-5488
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506865
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MONAHAN, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6084 EAGLE TRACE LANE
 City BANNING State CA Zip Code 92220-5488
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512653
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 484 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONCARZ, PIOTR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3255 EMERSON STREET
 City PALO ALTO State CA Zip Code 94306-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPONENT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **04 / 08 / 2017**
Transaction ID : SA11A.501452
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MONCARZ, PIOTR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3255 EMERSON STREET
 City PALO ALTO State CA Zip Code 94306-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPONENT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **05 / 08 / 2017**
Transaction ID : SA11A.505271
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MONCARZ, PIOTR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3255 EMERSON STREET
 City PALO ALTO State CA Zip Code 94306-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPONENT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **06 / 08 / 2017**
Transaction ID : SA11A.509500
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONKMAN, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 CARILLON POINT
 City KIRKLAND State WA Zip Code 98033-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES ENTERPRISES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502888
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. MONKMAN, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 CARILLON POINT
 City KIRKLAND State WA Zip Code 98033-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES ENTERPRISES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 04 / 27 / 2017
Transaction ID : SA11A.503532
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. MONKMAN, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 CARILLON POINT
 City KIRKLAND State WA Zip Code 98033-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES ENTERPRISES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 05 / 21 / 2017
Transaction ID : SA11A.506300
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONKMAN, WILLIAM, R.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 CARILLON POINT
 City KIRKLAND State WA Zip Code 98033-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES ENTERPRISES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 06 / 21 / 2017
Transaction ID : SA11A.512216
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MONTGOMERY, WILLIAM, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5051 50TH AVENUE NE APT 14
 City SEATTLE State WA Zip Code 98105-2873
 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 ▼ 300.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511604
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MONTGOMERY, WILLIAM, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5051 50TH AVENUE NE APT 14
 City SEATTLE State WA Zip Code 98105-2873
 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 ▼ 300.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511605
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTGOMERY, WILLIAM, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5051 50TH AVENUE NE APT 14
 City SEATTLE State WA Zip Code 98105-2873
 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 ▼ 300.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512088
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOONEY, EDWARD, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7038 N BEACH DRIVE
 City MILWAUKEE State WI Zip Code 53217-3657
 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 ▼ 5000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504651
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. MOORE, DONNA, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 SW 130TH AVENUE
 City BEAVERTON State OR Zip Code 97008-5116
 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 ▼ 395.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505858
 Amount of Each Receipt this Period 80.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5180.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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(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)
Team Ryan

A. MOORE, DONNA, M., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7000 SW 130TH AVENUE

City BEAVERTON	State OR	Zip Code 97008-5116
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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 ▼
395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2017

Transaction ID : SA11A.511479

Amount of Each Receipt this Period
90.00

Memo Item
CONTRIBUTION

B. MOORE, LEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16650 SCHOENBORN ST.

City NORTH HILLS	State CA	Zip Code 91343-6106
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE INDUSTRIES	Occupation (for Individual) ENGINEER
---	---

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
04		20		2017

Transaction ID : SA11A.502788

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MOORE, LEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16650 SCHOENBORN ST.

City NORTH HILLS	State CA	Zip Code 91343-6106
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE INDUSTRIES	Occupation (for Individual) ENGINEER
---	---

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
05		20		2017

Transaction ID : SA11A.506339

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 489 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, LEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16650 SCHOENBORN ST.
 City NORTH HILLS State CA Zip Code 91343-6106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOORE INDUSTRIES Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511943
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOORE, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PINE STREET
 City NEWTOWN SQUARE State PA Zip Code 19073-3340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAZZ PHARMACEUTICALS Occupation (for Individual) QUALITY & DRUG SAFETY PROFES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 04 / 2017
Transaction ID : SA11A.508757
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MOORE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3585 E. STATE ROAD 114-92
 City ROANOKE State IN Zip Code 46783-9220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EE/GRAIN FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.501243
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**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 490 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3585 E. STATE ROAD 114-92
 City ROANOKE State IN Zip Code 46783-9220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EE/GRAIN FARMER
 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
 04 / 28 / 2017
Transaction ID : SA11A.503703
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MORE, ANAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 W 61ST ST APT 26A
 City NEW YORK State NY Zip Code 10023-7614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROOKSIDE CAPITAL Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : SA11A.504485
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

C. MORGAN, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6830 MASSEY LANE
 City MEMPHIS State TN Zip Code 38120-3315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOYLES INC CO Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2017
Transaction ID : SA11A.501005
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11050.00
TOTAL This Period (last page this line number only).....▶	

**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 491 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGAN, SAMUEL, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3500 PENTAGON BLVD STE 400
 City BEAVERCREEK State OH Zip Code 45431-2376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERNIE GREEN INDUSTRIES, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505670
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

B. MORGAN, TODD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1999 AVENUE OF THE STARS STE 3200
 City LOS ANGELES State CA Zip Code 90067-6041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELL AIR INVESTMENT ADVISORS Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502976
 Amount of Each Receipt this Period 7500.00
 Memo Item CONTRIBUTION

C. MORRISON, DEAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2609 S HUGHES ST
 City AMARILLO State TX Zip Code 79109-2308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMARILLO BUDWEISER Occupation (for Individual) BEER DISTRIBUTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.509049
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

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

**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 492 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISEY, DENISE, HENRY, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7400 PARK TERRACE DR
City ALEXANDRIA State VA Zip Code 22307-2039
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CAPITOL COUNSEL Occupation (for Individual) PARTNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 14 / 2017
Transaction ID : SA11A.501748
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. MORRILL, JOAN, R., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 431 MAPLE TREE DRIVE APT 501
City ALTOONA State FL Zip Code 32702-9051
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 ▼ 300.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.501972
Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. MORRILL, JOAN, R., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 431 MAPLE TREE DRIVE APT 501
City ALTOONA State FL Zip Code 32702-9051
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 ▼ 300.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510689
Amount of Each Receipt this Period 200.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2800.00
TOTAL This Period (last page this line number only).....▶	

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

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MORRIS, WILLIAM, H., DR., JR.

Mailing Address 1111 MACARTHUR BOULEVARD

City MUNSTER State IN Zip Code 46321-3005

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 ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2017

Transaction ID : SA11A.504151

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MORSE, M'LISSA, M., ,

Mailing Address 1020 LAKE SUMTER LANDING

City THE VILLAGES State FL Zip Code 32162-2699

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017

Transaction ID : SA11A.512962

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MORSE, MARK, , ,

Mailing Address 1020 LAKE SUMTER LANDING

City THE VILLAGES State FL Zip Code 32162-2699

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE VILLAGES OF LAKE SUMTER INC Occupation (for Individual) REAL ESTATE DEVELOPER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017

Transaction ID : SA11A.512961

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 101000.00

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

**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 494 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 CEDAR LN
 City LINCOLNSHIRE State IL Zip Code 60069-3106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) APT RENTALS & FARM LAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503983
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

B. MOSER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 CEDAR LN
 City LINCOLNSHIRE State IL Zip Code 60069-3106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) APT RENTALS & FARM LAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11A.508659
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. MOSER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 CEDAR LN
 City LINCOLNSHIRE State IL Zip Code 60069-3106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) APT RENTALS & FARM LAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513606
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 495 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MOSHER, JULIE, A., ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 12 / 2017
Mailing Address 825 N PROSPECT AVE STE 902		Transaction ID : SA11A.504700
City MILWAUKEE	State WI	Zip Code 53202-3959
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MOTTER JR., FRED, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 29 / 2017
Mailing Address 1445 THAYER PLACE		Transaction ID : SA11A.504084
City MT PLEASANT	State SC	Zip Code 29466-9027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MOTTER JR., FRED, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 29 / 2017
Mailing Address 1445 THAYER PLACE		Transaction ID : SA11A.507520
City MT PLEASANT	State SC	Zip Code 29466-9027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	2050.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 496 OF 1054
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOTTER JR., FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1445 THAYER PLACE
 City MT PLEASANT State SC Zip Code 29466-9027
 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 ▼ 240.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513317
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOURAD, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 298 LAKE SCRANTON ROAD
 City SCRANTON State PA Zip Code 18505-2291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLY SERVICES Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 09 / 2017
Transaction ID : SA11A.501403
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MOURAD, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 298 LAKE SCRANTON ROAD
 City SCRANTON State PA Zip Code 18505-2291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLY SERVICES Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.504036
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 497 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOURAD, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 298 LAKE SCRANTON ROAD
 City SCRANTON State PA Zip Code 18505-2291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLY SERVICES Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 09 / 2017
Transaction ID : SA11A.505323
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOURAD, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 298 LAKE SCRANTON ROAD
 City SCRANTON State PA Zip Code 18505-2291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLY SERVICES Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507269
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MOURAD, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 298 LAKE SCRANTON ROAD
 City SCRANTON State PA Zip Code 18505-2291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLY SERVICES Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 09 / 2017
Transaction ID : SA11A.509710
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**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 498 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOURAD, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 298 LAKE SCRANTON ROAD

City SCRANTON	State PA	Zip Code 18505-2291
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLY SERVICES	Occupation (for Individual) BUSINESS ANALYST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

Transaction ID : SA11A.513665

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MOURAD TURNER, MAJIDA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1455 PENNSYLVANIA AVENUE NW
SUITE 550

City WASHINGTON	State DC	Zip Code 20004-1024
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHENIERE ENERGY INC	Occupation (for Individual) VP GOVERNMENT RELATIONS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	26	/	2017

Transaction ID : SA11A.506577

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. MOUSSA, RACHEL, C., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5913 FOX GLEN LN

City FLOWER MOUND	State TX	Zip Code 75028-3793
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
---	---

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
06	/	07	/	2017

Transaction ID : SA11A.508948

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5275.00
TOTAL This Period (last page this line number only).....	

**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 499 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOUYIARIS, NIKOS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32-02 QUEENS BLVD

City LONG ISLAND CITY	State NY	Zip Code 11101-2319
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MANA PRODUCTS	Occupation (for Individual) PRESIDENT AND CEO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11A.505865

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. MOWERY, JOSEPH, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 CENTER ST #2400

City LITTLE ROCK	State AR	Zip Code 72201-4447
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEPHENS	Occupation (for Individual) INVESTMENT BANKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2017

Transaction ID : SA11A.504193

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. MUIR, ROBERT, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1314 E HILLSIDE DRIVE

City PEORIA	State IL	Zip Code 61614-3151
----------------	-------------	------------------------

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 ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2017

Transaction ID : SA11A.500791

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5550.00
TOTAL This Period (last page this line number only).....	

**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 500 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULANAX, SHELLY, D., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 E RIVERCREST DRIVE
 City HOUSTON State TX Zip Code 77042-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2017
Transaction ID : SA11A.512111
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. MULE, EDWARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 DAIRY RD
 City GREENWICH State CT Zip Code 06830-3447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SILVER POINT CAPITAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2017
Transaction ID : SA11A.507896
 Amount of Each Receipt this Period
 44300.00
 Memo Item
 CONTRIBUTION

C. MULLANE, WILLIAM, P., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 S PORT ROYAL DRIVE
 City HILTON HEAD ISLAND State SC Zip Code 29928-5540
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.505191
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45500.00
TOTAL This Period (last page this line number only).....	

**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 501 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLIN, JAMEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14250 LITTLE HICKORY
 City ARCADIA State OK Zip Code 73007-8116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508988
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. MULLIN, PAUL, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4642 CAVENDISH RD
 City INDIANAPOLIS State IN Zip Code 46220-5325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.504674
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. MULVIHILL, DANIEL, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 85012
 City SAN DIEGO State CA Zip Code 92186-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC SOUTHWEST MORTGAGE Occupation (for Individual) MORTGAGE BANKING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2017
Transaction ID : SA11A.501285
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 502 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MULVIHILL, DANIEL, F., MR.,

Mailing Address P.O.BOX 85012

City SAN DIEGO	State CA	Zip Code 92186-5012
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACIFIC SOUTHWEST MORTGAGE	Occupation (for Individual) MORTGAGE BANKING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2017

Transaction ID : SA11A.505296

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MULVIHILL, DANIEL, F., MR.,

Mailing Address P.O.BOX 85012

City SAN DIEGO	State CA	Zip Code 92186-5012
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACIFIC SOUTHWEST MORTGAGE	Occupation (for Individual) MORTGAGE BANKING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11A.509355

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MURPHY, HARRY, D., MR.,

Mailing Address PO BOX 160

City WALLACE	State NC	Zip Code 28466-0160
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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 ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2017

Transaction ID : SA11A.512298

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	

**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 503 OF 1054		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11800 PEBBLEPOINTE PASS
 City CARMEL State IN Zip Code 46033-9671
 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 ▼ 400.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504411
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MURPHY, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11800 PEBBLEPOINTE PASS
 City CARMEL State IN Zip Code 46033-9671
 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 ▼ 400.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512499
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MURPHY, JOSEPH, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3412 NANTUCKET DR.
 City LEXINGTON State KY Zip Code 40502-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 04 / 14 / 2017
Transaction ID : SA11A.501641
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 504 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, JOSEPH, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3412 NANTUCKET DR.
 City LEXINGTON State KY Zip Code 40502-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **04 / 21 / 2017**
Transaction ID : SA11A.502886
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 TO BE CHARGED BACK

B. MURPHY, JOSEPH, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3412 NANTUCKET DR.
 City LEXINGTON State KY Zip Code 40502-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **05 / 21 / 2017**
Transaction ID : SA11A.506294
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 TO BE CHARGED BACK

C. MURPHY, JOSEPH, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3412 NANTUCKET DR.
 City LEXINGTON State KY Zip Code 40502-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **06 / 21 / 2017**
Transaction ID : SA11A.512214
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 TO BE CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 505 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, ROBERT, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 N JEFFERSON AVE
 STE 400
 City EL DORADO State AR Zip Code 71730-5854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 06 / 2017
Transaction ID : SA11A.500881
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. MURPHY, WENDELL, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1113
 City WALLACE State NC Zip Code 28466-1113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512294
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. MURPHY, WENDELL, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1113
 City WALLACE State NC Zip Code 28466-1113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512296
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 29000.00
TOTAL This Period (last page this line number only)..... ▶

**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 506 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25820 CREEKBEND DRIVE
 City BONITA SPRINGS State FL Zip Code 34135-9519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 13 / 2017**
Transaction ID : SA11A.501712
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MURRAY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25820 CREEKBEND DRIVE
 City BONITA SPRINGS State FL Zip Code 34135-9519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 13 / 2017**
Transaction ID : SA11A.505774
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MURRAY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25820 CREEKBEND DRIVE
 City BONITA SPRINGS State FL Zip Code 34135-9519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 13 / 2017**
Transaction ID : SA11A.510273
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 507 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MYERS, JANET, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 S GRANT STREET
 City WAYNESBORO State PA Zip Code 17268-1516
 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 ▼ 300.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504840
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MYERS, JANET, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 S GRANT STREET
 City WAYNESBORO State PA Zip Code 17268-1516
 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 ▼ 300.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511840
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NANIA, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 CANTERA DR. SUITE 219
 City WARRENVILLE State IL Zip Code 60555-3040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN NANIA Occupation (for Individual) NANIA ENERGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 04 / 07 / 2017
Transaction ID : SA11A.501287
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**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 508 OF 1054
	<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)
Team Ryan

A. NANIA, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4200 CANTERA DR.
SUITE 219

City WARRENVILLE State IL Zip Code 60555-3040

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN NANIA Occupation (for Individual) NANIA ENERGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 07 / 2017
Transaction ID : SA11A.505289

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. NANIA, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4200 CANTERA DR.
SUITE 219

City WARRENVILLE State IL Zip Code 60555-3040

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN NANIA Occupation (for Individual) NANIA ENERGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.509349

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. NAVAB, ALEXANDER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 W 57TH ST STE 4200

City NEW YORK State NY Zip Code 10019-2707

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KKR Occupation (for Individual) MEMBER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507911

Amount of Each Receipt this Period 25000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25200.00

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

**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 509 OF 1054
	<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	<input type="checkbox"/> 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)
Team Ryan

A. NAYAK, SATISH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1449 NE 281

City ANDREWS	State TX	Zip Code 79714-9007
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017

Transaction ID : SA11A.509045

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. NEELON, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 325 COTUIT ROAD

City MARSTONS MILLS	State MA	Zip Code 02648-1838
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOSTON INTERNATIONAL LAW GROUP	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2017

Transaction ID : SA11A.510635

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. NEELY, SUSAN, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1275 PENNSYLVANIA AVE NW STE 1100

City WASHINGTON	State DC	Zip Code 20004-2417
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN BEVERAGE ASSOCIATION	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2017

Transaction ID : SA11A.513022

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15250.00
TOTAL This Period (last page this line number only).....	

**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 510 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8830 MCAVOY DR.
 City HOUSTON State TX Zip Code 77074-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY MUTUAL Occupation (for Individual) AGENT
 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
 04 / 27 / 2017
Transaction ID : SA11A.503508
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NELSON, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8830 MCAVOY DR.
 City HOUSTON State TX Zip Code 77074-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY MUTUAL Occupation (for Individual) AGENT
 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
 05 / 27 / 2017
Transaction ID : SA11A.507805
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NELSON, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8830 MCAVOY DR.
 City HOUSTON State TX Zip Code 77074-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY MUTUAL Occupation (for Individual) AGENT
 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
 06 / 27 / 2017
Transaction ID : SA11A.512839
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 511 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. NELSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23043 SNAPPER LANE
 City CUDJOE KEY State FL Zip Code 33042-4331
 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 ▼ 600.00

Date of Receipt **04 / 19 / 2017**
Transaction ID : SA11A.502720
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NELSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23043 SNAPPER LANE
 City CUDJOE KEY State FL Zip Code 33042-4331
 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 ▼ 600.00

Date of Receipt **05 / 19 / 2017**
Transaction ID : SA11A.505962
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NELSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23043 SNAPPER LANE
 City CUDJOE KEY State FL Zip Code 33042-4331
 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 ▼ 600.00

Date of Receipt **06 / 19 / 2017**
Transaction ID : SA11A.511718
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 512 OF 1054
	<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	

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)
Team Ryan

A. NEUHOFF, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2918 MARSHALL BLVD

City SULLIVANS ISLAND	State SC	Zip Code 29482-9637
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GSP MARKETING TECHNOLOGIES, INC.	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : SA11A.503996

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. NEUHOFF, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2918 MARSHALL BLVD

City SULLIVANS ISLAND	State SC	Zip Code 29482-9637
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GSP MARKETING TECHNOLOGIES, INC.	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11A.507251

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. NEUHOFF, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2918 MARSHALL BLVD

City SULLIVANS ISLAND	State SC	Zip Code 29482-9637
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GSP MARKETING TECHNOLOGIES, INC.	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11A.513623

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**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 513 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD.
 City MEDINA State WA Zip Code 98039-5321
 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 ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2017
Transaction ID : SA11A.501059
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD.
 City MEDINA State WA Zip Code 98039-5321
 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 ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503993
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD.
 City MEDINA State WA Zip Code 98039-5321
 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 ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503994
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 514 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD.
 City MEDINA State WA Zip Code 98039-5321
 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 ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2017
Transaction ID : SA11A.504303
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD.
 City MEDINA State WA Zip Code 98039-5321
 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 ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11A.508649
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD.
 City MEDINA State WA Zip Code 98039-5321
 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 ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11A.508664
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 515 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. NEUMANN, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 438 UPLAND RD.

City MEDINA	State WA	Zip Code 98039-5321
----------------	-------------	------------------------

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 ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2017

Transaction ID : SA11A.508770

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

REFUNDED \$100.00 ON 06/13/2017

B. NEUMANN, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 438 UPLAND RD.

City MEDINA	State WA	Zip Code 98039-5321
----------------	-------------	------------------------

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 ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11A.513600

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. NEUMANN, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 438 UPLAND RD.

City MEDINA	State WA	Zip Code 98039-5321
----------------	-------------	------------------------

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 ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11A.513700

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 516 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NGUYEN, NGAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 696 EAST SANTA CLARA STREET
 108
 City SAN JOSE State CA Zip Code 95112-1911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 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
 04 / 01 / 2017
Transaction ID : SA11A.500693
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. NGUYEN, NGAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 696 EAST SANTA CLARA STREET
 108
 City SAN JOSE State CA Zip Code 95112-1911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 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
 04 / 08 / 2017
Transaction ID : SA11A.501432
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NGUYEN, NGAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 696 EAST SANTA CLARA STREET
 108
 City SAN JOSE State CA Zip Code 95112-1911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 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
 05 / 27 / 2017
Transaction ID : SA11A.507751
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**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 517 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. NICHOLS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ARGOS
 City LAGUNA NIGUEL State CA Zip Code 92677-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WJA ASSET MANAGEMENT Occupation (for Individual) FUND MANAGER
 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
 04 / 23 / 2017
Transaction ID : SA11A.503109
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NICHOLS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ARGOS
 City LAGUNA NIGUEL State CA Zip Code 92677-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WJA ASSET MANAGEMENT Occupation (for Individual) FUND MANAGER
 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
 05 / 23 / 2017
Transaction ID : SA11A.506400
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NICHOLS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ARGOS
 City LAGUNA NIGUEL State CA Zip Code 92677-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WJA ASSET MANAGEMENT Occupation (for Individual) FUND MANAGER
 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
 06 / 23 / 2017
Transaction ID : SA11A.512401
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 518 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICKOLL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 WILSHIRE BLVD APT 1503
 City LOS ANGELES State CA Zip Code 90024-4220
 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 M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503962
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NICKOLL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 WILSHIRE BLVD APT 1503
 City LOS ANGELES State CA Zip Code 90024-4220
 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 M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.504006
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NICKOLL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 WILSHIRE BLVD APT 1503
 City LOS ANGELES State CA Zip Code 90024-4220
 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 M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11A.508657
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 519 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICKOLL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 WILSHIRE BLVD APT 1503
 City LOS ANGELES State CA Zip Code 90024-4220
 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 05 / 31 / 2017
Transaction ID : SA11A.508662
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NICKOLL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 WILSHIRE BLVD APT 1503
 City LOS ANGELES State CA Zip Code 90024-4220
 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 06 / 30 / 2017
Transaction ID : SA11A.513701
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NIEHAUS, ROBERT, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 PARK AVE #16D
 City NEW YORK State NY Zip Code 10021-4169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GCP CAPITAL PARTNERS Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504319
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25200.00
TOTAL This Period (last page this line number only).....	

**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 520 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIEMEIER, STEPHEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2619 TIMBER RIDGE DR
 City TEMPLE State TX Zip Code 76502-8804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BGFN Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506051
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION

B. NIENHUIS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1696 HIGH POINTE. DR.
 City ZEELAND State MI Zip Code 49464-1484
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2017
Transaction ID : SA11A.501609
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. NIENHUIS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1696 HIGH POINTE. DR.
 City ZEELAND State MI Zip Code 49464-1484
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.505418
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 521 OF 1054
(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)
Team Ryan

A. NIENHUIS, JAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1696 HIGH POINTE. DR.

City ZEELAND	State MI	Zip Code 49464-1484
-----------------	-------------	------------------------

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 ▼
600.00

Date of Receipt
MM / DD / YYYY
06 / 12 / 2017

Transaction ID : SA11A.510002

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. NIMMER, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6717 NE 181ST ST.
201

City KENMORE	State WA	Zip Code 98028-4837
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PROPERTY MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt
MM / DD / YYYY
04 / 07 / 2017

Transaction ID : SA11A.501263

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. NIMMER, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6717 NE 181ST ST.
201

City KENMORE	State WA	Zip Code 98028-4837
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PROPERTY MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1550.00

Date of Receipt
MM / DD / YYYY
04 / 19 / 2017

Transaction ID : SA11A.502731

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**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 522 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST.
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503976
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST.
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2017
Transaction ID : SA11A.505968
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST.
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : SA11A.508671
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 523 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST.
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2017
Transaction ID : SA11A.511734
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST.
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513598
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NISWONGER, SCOTT, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 938
 City GREENEVILLE State TN Zip Code 37744-0938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDAIR Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506597
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**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 524 OF 1054
	<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)
Team Ryan

A. NISWONGER, SCOTT, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 938
 City GREENEVILLE State TN Zip Code 37744-0938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDAIR Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508935
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. NIX, DAVID, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2526 BLUE MEADOW DR
 City TEMPLE State TX Zip Code 76502-7924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE DAVID NIX AGENCY Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.506021
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. NOLAN, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 N JEFFERSON AVENUE SUITE 308
 City EL DORADO State AR Zip Code 71730-5853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUNOCO COMPANY Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502942
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 22500.00
TOTAL This Period (last page this line number only)..... ▶

**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 525 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORDONE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LINCOLN AVE
 City PISCATAWAY State NJ Zip Code 08854-4865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONEBEACON INSURANCE GROUP Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503754
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NORDONE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LINCOLN AVE
 City PISCATAWAY State NJ Zip Code 08854-4865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONEBEACON INSURANCE GROUP Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507454
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NORDONE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LINCOLN AVE
 City PISCATAWAY State NJ Zip Code 08854-4865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONEBEACON INSURANCE GROUP Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513201
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 527 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. NORFLEET, GLENN, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98 BOBWHITE DR.

City MANCHESTER	State TN	Zip Code 37355-5920
--------------------	-------------	------------------------

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 ▼
1030.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2017

Transaction ID : SA11A.503869

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. NORFLEET, GLENN, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98 BOBWHITE DR.

City MANCHESTER	State TN	Zip Code 37355-5920
--------------------	-------------	------------------------

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 ▼
1030.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2017

Transaction ID : SA11A.506844

Amount of Each Receipt this Period
55.00

Memo Item
CONTRIBUTION

C. NORFLEET, GLENN, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98 BOBWHITE DR.

City MANCHESTER	State TN	Zip Code 37355-5920
--------------------	-------------	------------------------

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 ▼
1030.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2017

Transaction ID : SA11A.508120

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	255.00
TOTAL This Period (last page this line number only).....▶	

**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 528 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOBWHITE DR.
 City MANCHESTER State TN Zip Code 37355-5920
 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 ▼ 1030.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512635
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

B. NOSRATI, ASGHAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MOTT LANE
 City HOUSTON State TX Zip Code 77024-7315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICO ENERGY RESOURCES , LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506766
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. NOSRATI, ASGHAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MOTT LANE
 City HOUSTON State TX Zip Code 77024-7315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICO ENERGY RESOURCES , LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.507857
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10055.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 529 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOVAK, PERO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9310 AMBERWOOD DR.
 City KIRTLAND State OH Zip Code 44094-8634
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503433
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NOVAK, PERO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9310 AMBERWOOD DR.
 City KIRTLAND State OH Zip Code 44094-8634
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506840
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NOVAK, PERO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9310 AMBERWOOD DR.
 City KIRTLAND State OH Zip Code 44094-8634
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512631
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**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 530 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NUCE, MADONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9879 GARLAND CT
 City WESTMINSTER State CO Zip Code 80021-4223
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2017
Transaction ID : SA11A.502461
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. NUCE, MADONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9879 GARLAND CT
 City WESTMINSTER State CO Zip Code 80021-4223
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.505713
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. NUCE, MADONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9879 GARLAND CT
 City WESTMINSTER State CO Zip Code 80021-4223
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2017
Transaction ID : SA11A.510821
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 531 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NUNE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11134 ESTANCIA WAY
 City CARMEL State IN Zip Code 46032-9612
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2017
Transaction ID : SA11A.501365
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. NUNE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11134 ESTANCIA WAY
 City CARMEL State IN Zip Code 46032-9612
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2017
Transaction ID : SA11A.505359
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. NUNE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11134 ESTANCIA WAY
 City CARMEL State IN Zip Code 46032-9612
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2017
Transaction ID : SA11A.510084
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 532 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NYSEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1030
 City BONSALL State CA Zip Code 92003-1030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NETGEAR INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11A.500713
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. NYSEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1030
 City BONSALL State CA Zip Code 92003-1030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NETGEAR INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503835
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. NYSEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1030
 City BONSALL State CA Zip Code 92003-1030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NETGEAR INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11A.508098
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**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 533 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DEA, JOHN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 HIGH RIDGE RD
 B-6
 City STAMFORD State CT Zip Code 06905-1930
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.503277
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. O'DEA, JOHN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 HIGH RIDGE RD
 B-6
 City STAMFORD State CT Zip Code 06905-1930
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2017
Transaction ID : SA11A.506727
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. O'DEA, JOHN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 HIGH RIDGE RD
 B-6
 City STAMFORD State CT Zip Code 06905-1930
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2017
Transaction ID : SA11A.512710
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 534 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'HARA, VERA NADINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MUSTANG ROAD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5250
 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 ▼ 300.00

Date of Receipt 04 / 18 / 2017
Transaction ID : SA11A.502566
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. O'HARA, VERA NADINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MUSTANG ROAD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5250
 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 ▼ 300.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.505888
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. O'HARA, VERA NADINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MUSTANG ROAD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5250
 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 ▼ 300.00

Date of Receipt 06 / 18 / 2017
Transaction ID : SA11A.511761
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 535 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. OBERER, AMY, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2080 AMYS RIDGE EAST CT

City BEAVERCREEK	State OH	Zip Code 45434-7103
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11A.505693

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. ODUM, FREIDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MYRTLEWOOD DRIVE

City SAVANNAH	State GA	Zip Code 31405-1084
------------------	-------------	------------------------

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 ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2017

Transaction ID : SA11A.503717

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ODUM, FREIDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MYRTLEWOOD DRIVE

City SAVANNAH	State GA	Zip Code 31405-1084
------------------	-------------	------------------------

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 ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2017

Transaction ID : SA11A.507464

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5100.00
TOTAL This Period (last page this line number only).....	

**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 536 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 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 ▼ 375.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11A.508440
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 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 ▼ 375.00

Date of Receipt 05 / 31 / 2017
Transaction ID : SA11A.508441
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 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 ▼ 375.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513214
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**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 537 OF 1054
	<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)
Team Ryan

A. ODUM, FREIDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MYRTLEWOOD DRIVE

City SAVANNAH	State GA	Zip Code 31405-1084
------------------	-------------	------------------------

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 ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11A.513627

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. OTT, GARY, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4156 N HUNTINGTON RD

City MARION	State IN	Zip Code 46952-9058
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TENDER LOVING CARE MANAGEMENT INC	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504692

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. PACE, JOHN, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 591 PENINSULA DR

City HOT SPRINGS	State AR	Zip Code 71901-8705
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : SA11A.504773

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7525.00
TOTAL This Period (last page this line number only).....	

**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 538 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PACK, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 NORTH PEYTONVILLE AVENUE
 City SOUTHLAKE State TX Zip Code 76092-5834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAM PACK AUTO GROUP Occupation (for Individual) AUTOMOTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11A.501075
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PAGE, HARVEY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 THE VILLAS
 City ODESSA State TX Zip Code 79765-8960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REF-CHEM LP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507932
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. PALOMO, OSWALDO, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 446 STURGES RD
 City FAIRFIELD State CT Zip Code 06824-2851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIC SPHERE INC Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 14 / 2017
Transaction ID : SA11A.510494
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4750.00
TOTAL This Period (last page this line number only).....	

**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 539 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PANTELIDIS, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 JFK PARKWAY

City SHORT HILLS	State NJ	Zip Code 07078-2716
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2017

Transaction ID : SA11A.504788

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. PAPE, WILLIAM, J., MR., II
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 218 OLD SHERMAN HILL RD

City WOODBURY	State CT	Zip Code 06798-3914
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN-REPUBLICAN INC	Occupation (for Individual) PUBLISHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2017

Transaction ID : SA11A.506377

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PAPE, WILLIAM, J., MR., II
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 218 OLD SHERMAN HILL RD

City WOODBURY	State CT	Zip Code 06798-3914
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN-REPUBLICAN INC	Occupation (for Individual) PUBLISHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 23 / 2017

Transaction ID : SA11A.512402

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**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 540 OF 1054
	<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)
Team Ryan

A. PARKER, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1582 TORRY PINE DR.
City YUBA CITY State CA Zip Code 95993-8222
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CHURCH OF GLAD TIDINGS Occupation (for Individual) MINISTER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 19 / 2017
Transaction ID : SA11A.502708
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PARKER, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1582 TORRY PINE DR.
City YUBA CITY State CA Zip Code 95993-8222
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CHURCH OF GLAD TIDINGS Occupation (for Individual) MINISTER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505936
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PARKER, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1582 TORRY PINE DR.
City YUBA CITY State CA Zip Code 95993-8222
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CHURCH OF GLAD TIDINGS Occupation (for Individual) MINISTER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511701
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**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 541 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARUBI, PAULIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3794 ETTMAN STREET
 City SHRUB OAK State NY Zip Code 10588-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOSEPH GENERAL CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 27 / 2017**
Transaction ID : SA11A.503544
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PARUBI, PAULIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3794 ETTMAN STREET
 City SHRUB OAK State NY Zip Code 10588-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOSEPH GENERAL CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 27 / 2017**
Transaction ID : SA11A.507801
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PARUBI, PAULIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3794 ETTMAN STREET
 City SHRUB OAK State NY Zip Code 10588-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOSEPH GENERAL CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 27 / 2017**
Transaction ID : SA11A.512837
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 542 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARVARANDEH, PIROOZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27210 OHLONE LANE
 City LOS ALTOS HILLS State CA Zip Code 94022-1986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) I.CLARITY, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506584
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

B. PASQUAN , STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 EUCALYPTUS ROAD
 City BELVEDERE State CA Zip Code 94920-2436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASQUAN LLP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : SA11A.500545
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

C. PATRICK, R., DAVID, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 E CREEKVIEW DR
 City SALADO State TX Zip Code 76571-5886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KPA ENGINEERS Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506065
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 543 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATRY, CLEMENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 HARBOURSIDE DR.
 City SUFFIELD State CT Zip Code 06078-1838
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : SA11A.500577
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PATRY, CLEMENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 HARBOURSIDE DR.
 City SUFFIELD State CT Zip Code 06078-1838
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2017
Transaction ID : SA11A.504225
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION
 TO BE CHARGED BACK

C. PATRY, CLEMENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 HARBOURSIDE DR.
 City SUFFIELD State CT Zip Code 06078-1838
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2017
Transaction ID : SA11A.508797
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION
 TO BE CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**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 544 OF 1054
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATTERSON, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2823 ASTER LAKE ROAD
 City HELENA State AL Zip Code 35022-7260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALABAMA GAS CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.504023
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. PATTERSON, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2823 ASTER LAKE ROAD
 City HELENA State AL Zip Code 35022-7260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALABAMA GAS CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507265
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PATTERSON, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2823 ASTER LAKE ROAD
 City HELENA State AL Zip Code 35022-7260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALABAMA GAS CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513655
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAYIAVLAS, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 FAIRWAY DR NE
 City WARREN State OH Zip Code 44483-5636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVI FOOD SYSTEMS, INC Occupation (for Individual) CHAIRMAN OF THE BOARD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504767
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

B. PAYLOR, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 422 W DUTCH CORNER RD
 City MCCONNELLSBURG State PA Zip Code 17233-8824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AHERN RENTALS Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503992
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION
 REFUNDED \$100.00 ON 07/17/2017

C. PAYLOR, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 422 W DUTCH CORNER RD
 City MCCONNELLSBURG State PA Zip Code 17233-8824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AHERN RENTALS Occupation (for Individual) COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507266
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 546 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAYNE, STANLEY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 HICKORY CREEK CT NW
 City LITTLE ROCK State AR Zip Code 72212-2534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2017
Transaction ID : SA11A.504246
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. PAYSSE, KENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11410 FALCON DR
 City TEMPLE State TX Zip Code 76502-6417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAYSSE INSURANCE Occupation (for Individual) AGENCY OWENER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507918
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. PEABODY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20036 OLD RIVER ROAD
 City WEST SACRAMENTO State CA Zip Code 95691-8004
 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 ▼ 300.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500982
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 3600.00
TOTAL This Period (last page this line number only).....▶

**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 547 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEABODY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20036 OLD RIVER ROAD
 City WEST SACRAMENTO State CA Zip Code 95691-8004
 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 ▼ 300.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512542
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. PEARSON, JOHN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 CRESTWAY LANE
 City SAINT PAUL State MN Zip Code 55118-4423
 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 ▼ 350.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511276
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PEARSON, SCOTT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 791 CRESCENT BLVD
 City GLEN ELLYN State IL Zip Code 60137-4263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GCM GROSVENOR Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501330
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5300.00
TOTAL This Period (last page this line number only).....▶	

**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 548 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEEK, ELIZABETH, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 PARK AVE PH C
 City NEW YORK State NY Zip Code 10075-0327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) JOURNALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 02 / 2017
Transaction ID : SA11A.504170
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. PEISEN, JESSICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 W JACKSON
 City MCALLEN State TX Zip Code 78501-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L&F DIST LLC Occupation (for Individual) BEER DISTRIBUTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 15 / 2017
Transaction ID : SA11A.510539
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. PEISEN, VAL, LAMANTIA, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 W JACKSON AVE
 City MCALLEN State TX Zip Code 78501-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L&F DISTRIBUTORS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512959
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

**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 549 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEISEN, VAL, LAMANTIA, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 W JACKSON AVE

City MCALLEN	State TX	Zip Code 78501-1133
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) L&F DISTRIBUTORS	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.512960

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. PELLETIER, WALTER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 DELLWOOD PL

City GOLDSBORO	State NC	Zip Code 27534-7531
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREENSBORO MILLING COMPANY	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.505689

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. PENNINGTON, ROBERT, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 RED COAT PASS

City DARIEN	State CT	Zip Code 06820-6021
----------------	-------------	------------------------

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 ▼
50050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2017
Transaction ID : SA11A.502768

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 550 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PENNINGTON, ROBERT, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 RED COAT PASS

City DARIEN	State CT	Zip Code 06820-6021
----------------	-------------	------------------------

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 ▼
50050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2017

Transaction ID : SA11A.507903

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

B. PERAINO, VITO, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6868 HERITAGE CLUB DR

City MASON	State OH	Zip Code 45040-4651
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN FINANCIAL GROUP	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : SA11A.505669

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

C. PERENCHIO, JERRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1999 AVENUE OF THE STARS STE 3050

City LOS ANGELES	State CA	Zip Code 90067-4613
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHARTWELL PARTNERS	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2017

Transaction ID : SA11A.502950

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	102500.00
TOTAL This Period (last page this line number only).....▶	

**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 551 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEREZ, JOSE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 HEATHER COURT
 City SCHERERVILLE State IN Zip Code 46375-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCELORMITTAL USA LLC Occupation (for Individual) OPERATING TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2017
Transaction ID : SA11A.501516
 Amount of Each Receipt this Period 17.00
 Memo Item
 CONTRIBUTION

B. PEREZ, JOSE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 HEATHER COURT
 City SCHERERVILLE State IN Zip Code 46375-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCELORMITTAL USA LLC Occupation (for Individual) OPERATING TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503336
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

C. PEREZ, JOSE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 HEATHER COURT
 City SCHERERVILLE State IN Zip Code 46375-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCELORMITTAL USA LLC Occupation (for Individual) OPERATING TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2017
Transaction ID : SA11A.504083
 Amount of Each Receipt this Period 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	67.00
TOTAL This Period (last page this line number only).....▶	

**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 552 OF 1054
	<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)
Team Ryan

A. PEREZ, JOSE, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 HEATHER COURT

City SCHERERVILLE	State IN	Zip Code 46375-1008
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARCELORMITTAL USA LLC	Occupation (for Individual) OPERATING TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2017

Transaction ID : SA11A.504168

Amount of Each Receipt this Period
7.00

Memo Item
CONTRIBUTION

B. PEREZ, JOSE, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 HEATHER COURT

City SCHERERVILLE	State IN	Zip Code 46375-1008
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARCELORMITTAL USA LLC	Occupation (for Individual) OPERATING TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2017

Transaction ID : SA11A.505366

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

C. PEREZ, JOSE, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 HEATHER COURT

City SCHERERVILLE	State IN	Zip Code 46375-1008
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARCELORMITTAL USA LLC	Occupation (for Individual) OPERATING TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2017

Transaction ID : SA11A.508319

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	32.00
TOTAL This Period (last page this line number only).....▶	

**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 553 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. PEREZ, WILLIAM, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1320 N STATE PARKWAY
 City CHICAGO State IL Zip Code 60610-2455
 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 ▼ 75000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506016
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

B. PEREZ, WILLIAM, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1320 N STATE PARKWAY
 City CHICAGO State IL Zip Code 60610-2455
 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 ▼ 75000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512438
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. PERFETTO, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 FIELDSTONE ROAD
 City READING State PA Zip Code 19608-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE BROKER
 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
 05 / 10 / 2017
Transaction ID : SA11A.504877
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50050.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 554 OF 1054
(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)
Team Ryan

A. PERFETTO, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 FIELDSTONE ROAD
 City READING State PA Zip Code 19608-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511211
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PERRETTA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1933 WILLIAMSBRIDGE RD
 City BRONX State NY Zip Code 10461-1604
 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 ▼ 720.00

Date of Receipt 04 / 29 / 2017
Transaction ID : SA11A.504119
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

C. PERRETTA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1933 WILLIAMSBRIDGE RD
 City BRONX State NY Zip Code 10461-1604
 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 ▼ 720.00

Date of Receipt 05 / 29 / 2017
Transaction ID : SA11A.507540
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 340.00
TOTAL This Period (last page this line number only)..... ▶

**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 555 OF 1054
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRETTA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1933 WILLIAMSBRIDGE RD
 City BRONX State NY Zip Code 10461-1604
 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 ▼ 720.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513324
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

B. PERRY, ADDIE, MITCHELL, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 865 OLD DALTON ROAD NE
 City ROME State GA Zip Code 30165-9096
 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 ▼ 285.00

Date of Receipt 04 / 14 / 2017
Transaction ID : SA11A.501639
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PERRY, ADDIE, MITCHELL, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 865 OLD DALTON ROAD NE
 City ROME State GA Zip Code 30165-9096
 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 ▼ 285.00

Date of Receipt 05 / 09 / 2017
Transaction ID : SA11A.504550
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	205.00
TOTAL This Period (last page this line number only).....▶	

**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 556 OF 1054
	<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)
Team Ryan

A. PERRY, ADDIE, MITCHELL, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 865 OLD DALTON ROAD NE
City ROME State GA Zip Code 30165-9096
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 ▼ 285.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511389
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PERRY, ADDIE, MITCHELL, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 865 OLD DALTON ROAD NE
City ROME State GA Zip Code 30165-9096
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 ▼ 285.00

Date of Receipt 06 / 23 / 2017
Transaction ID : SA11A.512133
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PESTI-CRUSOE, AGNES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 41150 FOX RUN APT WB406
City NOVI State MI Zip Code 48377-4862
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 ▼ 300.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.505443
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 557 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ROBERTS DRIVE
 City WESTAMPTON State NJ Zip Code 08060-4401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFECTIOUS DISEASE PHYSICIANS PA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503965
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PETERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ROBERTS DRIVE
 City WESTAMPTON State NJ Zip Code 08060-4401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFECTIOUS DISEASE PHYSICIANS PA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507309
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PETERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ROBERTS DRIVE
 City WESTAMPTON State NJ Zip Code 08060-4401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFECTIOUS DISEASE PHYSICIANS PA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513691
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**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 558 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, JOSEPHINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3080 TULAROSA LANE
 City LAS VEGAS State NV Zip Code 89122-3348
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503328
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. PETERSON, JOSEPHINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3080 TULAROSA LANE
 City LAS VEGAS State NV Zip Code 89122-3348
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513340
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. PETERSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1490
 City WOODINVILLE State WA Zip Code 98072-1490
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506243
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**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 559 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1490
 City WOODINVILLE State WA Zip Code 98072-1490
 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 ▼ 250.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513547
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PEZESHKAN, FRED, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 5TH AVE S STE 111
 City NAPLES State FL Zip Code 34102-3492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUMMIT MANAGEMENT GROUP Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506610
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. PFEIL, RICHARD, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 E WAYNE ST STE 305 SUITE 305
 City SOUTH BEND State IN Zip Code 46601-2369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIEL INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504802
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15050.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 560 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHELPS, CARRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18300 HENRY COURT
 City RAY State MI Zip Code 48096-3548
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2017
Transaction ID : SA11A.502704
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PHELPS, CARRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18300 HENRY COURT
 City RAY State MI Zip Code 48096-3548
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2017
Transaction ID : SA11A.505941
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PHELPS, CARRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18300 HENRY COURT
 City RAY State MI Zip Code 48096-3548
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2017
Transaction ID : SA11A.511702
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**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 561 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHILLIPS, W., T., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 50730
 City KNOXVILLE State TN Zip Code 37950-0730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508970
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. PIAZZOLA, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GIFFARD WAY
 City MELVILLE State NY Zip Code 11747-2311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVALONBAY COMMUNITIES Occupation (for Individual) REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : SA11A.502562
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PIAZZOLA, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GIFFARD WAY
 City MELVILLE State NY Zip Code 11747-2311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVALONBAY COMMUNITIES Occupation (for Individual) REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2017
Transaction ID : SA11A.505897
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2600.00
TOTAL This Period (last page this line number only).....▶	

**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 562 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIAZZOLA, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GIFFARD WAY
 City MELVILLE State NY Zip Code 11747-2311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVALONBAY COMMUNITIES Occupation (for Individual) REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2017
Transaction ID : SA11A.511766
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. PICCIOTTI, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 267
 City WILLIAMS State AZ Zip Code 86046-0267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAFEWAY Occupation (for Individual) RETIRED/BAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.503457
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. PICCIOTTI, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 267
 City WILLIAMS State AZ Zip Code 86046-0267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAFEWAY Occupation (for Individual) RETIRED/BAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513248
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 563 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. PIEPER, RICHARD, R., MR., SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11602 N. SHORECLIFF

City MEQUON	State WI	Zip Code 53092-3528
----------------	-------------	------------------------

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 ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11A.500863

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. PIERCE, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4500 SPENCER STREET

City TORRANCE	State CA	Zip Code 90503-2438
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCS ENGINEERS	Occupation (for Individual) ENGINEER
--	---

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
06		09		2017

Transaction ID : SA11A.509743

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PIERCE, LEON, A., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 GREENLEAF DR.

City WOLFEBORO	State NH	Zip Code 03894-4226
-------------------	-------------	------------------------

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 ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		18		2017

Transaction ID : SA11A.502571

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25350.00
TOTAL This Period (last page this line number only).....	

**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 564 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIERCE, LEON, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 GREENLEAF DR.
 City WOLFEBORO State NH Zip Code 03894-4226
 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 ▼ 900.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.505904
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PIERCE, LEON, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 GREENLEAF DR.
 City WOLFEBORO State NH Zip Code 03894-4226
 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 ▼ 900.00

Date of Receipt 06 / 18 / 2017
Transaction ID : SA11A.511758
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PIERCE, WILLIE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1499 HIGHWAY 11 NORTH PETAL
 City PETAL State MS Zip Code 39465-9586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503428
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 565 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. PIERCE, WILLIE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1499 HIGHWAY 11 NORTH
 PETAL
 City PETAL State MS Zip Code 39465-9586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIE Occupation (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
 05 / 26 / 2017
Transaction ID : SA11A.506882
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PIERCE, WILLIE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1499 HIGHWAY 11 NORTH
 PETAL
 City PETAL State MS Zip Code 39465-9586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIE Occupation (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
 06 / 26 / 2017
Transaction ID : SA11A.512627
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PIKE, JOHN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 LAKE SHORE DR
 City GOLDSBORO State NC Zip Code 27534-8970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENSBORO MILLING COMPANY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.505688
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**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 566 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PILKINGTON, LAUREL, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8352 POISON OAK RD
 City TEMPLE State TX Zip Code 76502-5422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506062
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. PIRRUNG, C, MARK, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3425 TUEXEDO RD
 City ATLANTA State GA Zip Code 30305-1050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATLANTA BEVERAGE CO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.505432
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. PIRRUNG, DEBBY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3425 TUXEDO RD
 City ATLANTA State GA Zip Code 30305-1050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.505431
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	

**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 567 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PITTS, JAMES, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 7TH STREET NW
 SUITE 200
 City WASHINGTON State DC Zip Code 20001-3883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAVIGATORS GLOBAL Occupation (for Individual) FOUNDING PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.500864
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. PLAYTIS, ANN, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 ETON COURT
 City WASHINGTON State WV Zip Code 26181-9521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505129
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PLAYTIS, ANN, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 ETON COURT
 City WASHINGTON State WV Zip Code 26181-9521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512096
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

**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 568 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. POGELER, CHERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 279 COUNTRYHAVEN ROAD
 City ENCINITAS State CA Zip Code 92024-3106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YMCA Occupation (for Individual) FITNESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503437
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. POGELER, CHERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 279 COUNTRYHAVEN ROAD
 City ENCINITAS State CA Zip Code 92024-3106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YMCA Occupation (for Individual) FITNESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506841
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. POGELER, CHERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 279 COUNTRYHAVEN ROAD
 City ENCINITAS State CA Zip Code 92024-3106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YMCA Occupation (for Individual) FITNESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512644
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 569 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. POLLARD, DICK, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6609 NORFOLK AVENUE
 City LUBBOCK State TX Zip Code 79413-5902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLLARD FORD Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 06 / 2017**
Transaction ID : SA11A.500910
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. POPE, BARBARA, J., MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1155 N DEARBORN ST APT 702
 City CHICAGO State IL Zip Code 60610-6539
 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 ▼ 250.00

Date of Receipt **05 / 15 / 2017**
Transaction ID : SA11A.505071
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. POPP, JOHN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12316 ABOITE CENTER RD
 City FORT WAYNE State IN Zip Code 46814-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFECTION BAKERIES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504672
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**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 570 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. POTTER, DENNIS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6503 BROOKS HILL CT
 City BETHESDA State MD Zip Code 20816-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) K&L GATES Occupation (for Individual) GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 11 / 2017
Transaction ID : SA11A.501464
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. POULIN, JEAN-FRANCOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 BOOKBINDER WAY
 City LANSDALE State PA Zip Code 19446-4056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANADA LIFE RE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2017
Transaction ID : SA11A.509454
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. POWELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 WEST BROAD OAKS DR.
 City HOUSTON State TX Zip Code 77056-1203
 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 ▼ 400.00

Date of Receipt 04 / 19 / 2017
Transaction ID : SA11A.502706
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	

**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 571 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. POWELL, JAMES, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1311 S MADISON STREET
 City SAN ANGELO State TX Zip Code 76901-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 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
 06 / 20 / 2017
Transaction ID : SA11A.511475
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. POWER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1490 CHEVIOT HILLS COURT
 City WESTLAKE VILLAGE State CA Zip Code 91361-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.504014
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. POWERS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 EMERALD CIRCLE
 City VALLEJO State CA Zip Code 94589-2737
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2017
Transaction ID : SA11A.502399
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**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 572 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. POWERS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 EMERALD CIRCLE

City VALLEJO	State CA	Zip Code 94589-2737
-----------------	-------------	------------------------

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.505602

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. POWERS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 EMERALD CIRCLE

City VALLEJO	State CA	Zip Code 94589-2737
-----------------	-------------	------------------------

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.511163

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PRESTAGE, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 W ARROWHEAD DR

City CLINTON	State NC	Zip Code 28328-3004
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRESTAGE FARMS	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512299

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

**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 573 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRESTAGE, SCOTT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 UNION SCHOOL RD
 City CLINTON State NC Zip Code 28328-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRESTAGE FARMS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512292
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. PRESTAGE, W., H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 COHARIE DR
 City CLINTON State NC Zip Code 28328-3014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRESTAGE FARMS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512300
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. PROCTOR, DANIEL, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 VERNER DRIVE
 City LA PALMA State CA Zip Code 90623-2043
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507203
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7550.00
TOTAL This Period (last page this line number only).....▶	

**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 574 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PSAROS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 AZALEA CIR
 City PURCHASE State NY Zip Code 10577-1131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KPS CAPITAL PARTNERS Occupation (for Individual) FUND MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504762
 Amount of Each Receipt this Period 25000.00
 Memo Item
 CONTRIBUTION

B. PULLMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2914 MANAGUA PLACE
 City CARLSBAD State CA Zip Code 92009-7105
 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 ▼ 600.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.504037
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. PULLMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2914 MANAGUA PLACE
 City CARLSBAD State CA Zip Code 92009-7105
 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 ▼ 600.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507272
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25200.00
TOTAL This Period (last page this line number only).....	

**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 575 OF 1054
	<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)
Team Ryan

A. PULLMAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2914 MANAGUA PLACE

City CARLSBAD	State CA	Zip Code 92009-7105
------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11A.513597

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

TO BE CHARGED BACK

B. QUARANTO, PAUL, A., MR., JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 MUSKET WAY

City FRANKLIN	State MA	Zip Code 02038-3627
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOSTON MUTUAL LIFE INSURANCE	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2017

Transaction ID : SA11A.510563

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. QUODOMINE JR., RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9598 HALYARDS COURT
14

City FORT MYERS	State FL	Zip Code 33919-4457
--------------------	-------------	------------------------

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 ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2017

Transaction ID : SA11A.501928

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1130.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 576 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. QUODOMINE JR., RICHARD, , ,		Date of Receipt MM / DD / YYYY 05 / 14 / 2017 Transaction ID : SA11A.505739
Mailing Address 9598 HALYARDS COURT 14		Amount of Each Receipt this Period 30.00
City FORT MYERS	State FL	Zip Code 33919-4457
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. QUODOMINE JR., RICHARD, , ,		Date of Receipt MM / DD / YYYY 06 / 14 / 2017 Transaction ID : SA11A.510607
Mailing Address 9598 HALYARDS COURT 14		Amount of Each Receipt this Period 30.00
City FORT MYERS	State FL	Zip Code 33919-4457
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RACHUNOW, JEREMIE, , ,		Date of Receipt MM / DD / YYYY 04 / 30 / 2017 Transaction ID : SA11A.503950
Mailing Address 250 EAST 54 ST 29B		Amount of Each Receipt this Period 50.00
City NEW YORK	State NY	Zip Code 10022-4810
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**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 577 OF 1054
	<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)
Team Ryan

A. RACHUNOW, JEREMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 EAST 54 ST
 29B
 City NEW YORK State NY Zip Code 10022-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507301
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RADDAWI, HARETH, , DR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 LOCHINVAR LANE
 City OAK BROOK State IL Zip Code 60523-1613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVOCATE MEDICINE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507928
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. RAFF, GAROLD, D., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16095 SAINT CROIX CIRCLE
 City HUNTINGTON BEACH State CA Zip Code 92649-2047
 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 ▼ 1000.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.504847
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3550.00
TOTAL This Period (last page this line number only)..... ▶

**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 578 OF 1054
	<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)
Team Ryan

A. RAFFANIELLO, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 7TH ST NW STE 400

City WASHINGTON	State DC	Zip Code 20004-2834
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAFFANIELLO AND ASSOCIATES	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2017

Transaction ID : SA11A.509518

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

REFUNDED \$2,500.00 ON 06/29/2017

B. RAFFANIELLO, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 7TH ST NW STE 400

City WASHINGTON	State DC	Zip Code 20004-2834
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAFFANIELLO AND ASSOCIATES	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.513025

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. RAHAL, EDWARD, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 CATHEDRAL AVENUE NW
APT. 707

City WASHINGTON	State DC	Zip Code 20016-3598
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EM RAHAL & CO	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.512750

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 579 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINBOLT, DAVID, E., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6226 N RIVIERA DR
 City OKLAHOMA CITY State OK Zip Code 73112-7360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANCFIRST Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508979
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. RAINES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 GRAMMONT ST
 City MONROE State LA Zip Code 71201-7516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 27 / 2017
Transaction ID : SA11A.503504
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAINES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 GRAMMONT ST
 City MONROE State LA Zip Code 71201-7516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507819
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 580 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 GRAMMONT ST
 City MONROE State LA Zip Code 71201-7516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512852
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RAISIAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21190 CANYON OAK WAY
 City CUPERTINO State CA Zip Code 95014-6572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOOVER INSTITUTION Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501520
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 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 ▼ 750.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.502027
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00
TOTAL This Period (last page this line number only)..... ▶

**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 581 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 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 ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.509042
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 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 ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.510652
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 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 ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2017
Transaction ID : SA11A.512141
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**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 582 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMSEY, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 JAYDEE TERRACE
 City GEORGETOWN State TX Zip Code 78628-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAMB VENTURES LLC Occupation (for Individual) CEO
 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
 04 / 28 / 2017
Transaction ID : SA11A.503758
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RAMSEY, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 JAYDEE TERRACE
 City GEORGETOWN State TX Zip Code 78628-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAMB VENTURES LLC Occupation (for Individual) CEO
 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
 05 / 28 / 2017
Transaction ID : SA11A.507490
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RANDLETT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 CHARLIE LACKEY RD
 City HIDDENITE State NC Zip Code 28636-8233
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2017
Transaction ID : SA11A.500654
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**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 583 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANDLETT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 CHARLIE LACKEY RD
 City HIDDENITE State NC Zip Code 28636-8233
 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 ▼ 650.00

Date of Receipt 05 / 02 / 2017
Transaction ID : SA11A.504186
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RANDLETT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 CHARLIE LACKEY RD
 City HIDDENITE State NC Zip Code 28636-8233
 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 ▼ 650.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.508377
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RANDLETT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 CHARLIE LACKEY RD
 City HIDDENITE State NC Zip Code 28636-8233
 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 ▼ 650.00

Date of Receipt 06 / 11 / 2017
Transaction ID : SA11A.510006
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 584 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANEY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5759 W. BERYL AVE
N.A.

City GLENDALE State AZ Zip Code 85302-1324

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHIATRIC CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500749

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

REFUNDED \$1,000.00 ON 05/18/2017

B. RANGOS, JOHN, G., , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 OSPREY POINT CIR

City BOCA RATON State FL Zip Code 33431-5245

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESSMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500938

Amount of Each Receipt this Period 10000.00

Memo Item CONTRIBUTION

C. RAPIER, GEORGE, M., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 E KINGS HWY

City SAN ANTONIO State TX Zip Code 78212-2961

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502967

Amount of Each Receipt this Period 2700.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13700.00
TOTAL This Period (last page this line number only).....	

**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 585 OF 1054
	<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)
Team Ryan

A. RASHKE, PATRICIA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 HAWK FEATHER CIR

City MADISON	State WI	Zip Code 53717-2744
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504678

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. RAWLS, JERRY, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 164 MARVIN AVE.

City LOS ALTOS	State CA	Zip Code 94022-3710
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11A.508956

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. RAY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8614 CADET DR

City KNOXVILLE	State TN	Zip Code 37922-8081
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) 21ST MORTGAGE CORP	Occupation (for Individual) CFO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2017

Transaction ID : SA11A.507914

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 586 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAYL, THOMAS, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7116 ROSE ANN PKWY
 City FORT WAYNE State IN Zip Code 46804-2848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.504853
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. READ, IAN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 E 42ND ST
 City NEW YORK State NY Zip Code 10017-5703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIZER Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504154
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. REDD, DOROTHY, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1884 E 2825 N
 City LAYTON State UT Zip Code 84040-3219
 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 ▼ 300.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503944
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55050.00
TOTAL This Period (last page this line number only)..... ▶

**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 587 OF 1054
	<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)
Team Ryan

A. REDD, DOROTHY, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1884 E 2825 N
 City LAYTON State UT Zip Code 84040-3219
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507308
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. REDD, DOROTHY, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1884 E 2825 N
 City LAYTON State UT Zip Code 84040-3219
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513667
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. REDMAN, MARILYN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 W BROADWAY BOULEVARD UNIT 71
 City TUCSON State AZ Zip Code 85745-2554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.510672
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**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 588 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, GLEN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 STRATFORD PL
 City ATLANTA State GA Zip Code 30342-3956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KING & SPALDING Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.504849
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. REED, VANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 PALOMINO
 City AMARILLO State TX Zip Code 79106-4114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REED BEVERAGE Occupation (for Individual) WHOLESALE DISTRIBUTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512753
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. REEDER, MARTINIQUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15690 SE 227TH STREET
 City KENT State WA Zip Code 98042-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTINIQUE REEDRER REALTOR Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11A.500585
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 589 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. REEDER, MARTINIQUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15690 SE 227TH STREET

City KENT	State WA	Zip Code 98042-3723
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARTINIQUE REEDRER REALTOR	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2017

Transaction ID : SA11A.504227

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. REEDER, MARTINIQUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15690 SE 227TH STREET

City KENT	State WA	Zip Code 98042-3723
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARTINIQUE REEDRER REALTOR	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2017

Transaction ID : SA11A.508799

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. REES-JONES, TREVOR, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8111 WESTCHESTER DR STE 900

City DALLAS	State TX	Zip Code 75225-6146
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHIEF OIL AND GAS	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
123850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11A.504313

Amount of Each Receipt this Period
123850.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	123950.00
TOTAL This Period (last page this line number only).....▶	

**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 590 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. REIMAN, ROY, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5350 S 60TH STREET
 City GREENDALE State WI Zip Code 53129-1440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) PUBLISHING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.502940
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. REYNOLDS, ROLAND, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 CENTAURI
 City GRAND JUNCTION State CO Zip Code 81506-1805
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2017
Transaction ID : SA11A.501398
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. REYNOLDS, ROLAND, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 CENTAURI
 City GRAND JUNCTION State CO Zip Code 81506-1805
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2017
Transaction ID : SA11A.505334
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**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 591 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, ROLAND, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 CENTAURI
 City GRAND JUNCTION State CO Zip Code 81506-1805
 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 ▼ 300.00

Date of Receipt 06 / 09 / 2017
Transaction ID : SA11A.509715
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RHODES, MARTIN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 LONGFELLOW PL
 City LITTLE ROCK State AR Zip Code 72207-3748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504715
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. RICH, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13290 CHALON ROAD
 City LOS ANGELES State CA Zip Code 90049-1213
 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 ▼ 1000.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503296
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
TOTAL This Period (last page this line number only).....▶	

**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 592 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. RICHARDS, JAMES, D., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 INDEPENDENCE AVE SE
 City WASHINGTON State DC Zip Code 20003-1021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNERSTONE GOVERNMENT AFFAIRS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511140
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. RICHARDS, LAURA, B., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 BOULDER ROAD
 City MANHASSET State NY Zip Code 11030-1632
 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 ▼ 240.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500979
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

C. RICHARDS, LAURA, B., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 BOULDER ROAD
 City MANHASSET State NY Zip Code 11030-1632
 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 ▼ 240.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512120
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2740.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 593 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2017
Transaction ID : SA11A.502749
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2017
Transaction ID : SA11A.505980
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2017
Transaction ID : SA11A.511729
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**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 594 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICKS, DAVID, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7550 N. WASHINGTON BLVD.
 City INDIANAPOLIS State IN Zip Code 46240-2863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELILILLY & CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508958
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION

B. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.503240
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503551
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2650.00
TOTAL This Period (last page this line number only).....	

**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 595 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 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 ▼ 900.00

Date of Receipt 05 / 25 / 2017
Transaction ID : SA11A.506698
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 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 ▼ 900.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507837
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 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 ▼ 900.00

Date of Receipt 06 / 25 / 2017
Transaction ID : SA11A.512683
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**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 596 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDER, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12206 QUORN LANE
 City RESTON State VA Zip Code 20191-2627
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512821
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. RIEDER, RICK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 DALE DR
 City SHORT HILLS State NJ Zip Code 07078-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLACKROCK Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 45000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.502903
 Amount of Each Receipt this Period
 20000.00
 Memo Item
 CONTRIBUTION

C. RIGGI, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 OLD GICK ROAD
 NA
 City SARATOGA SPRINGS State NY Zip Code 12866-9450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TURBINESERVICES,LTD. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : SA11A.502557
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	20350.00
TOTAL This Period (last page this line number only).....▶	

**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 597 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RILEY, RUTH, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2909 WOODLAMD
 618
 City DES MOINES State IA Zip Code 50312-3885
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2017
Transaction ID : SA11A.502385
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. RILEY, RUTH, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2909 WOODLAMD
 618
 City DES MOINES State IA Zip Code 50312-3885
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2017
Transaction ID : SA11A.502746
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. RILEY, RUTH, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2909 WOODLAMD
 618
 City DES MOINES State IA Zip Code 50312-3885
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.505592
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 598 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. RILEY, RUTH, L., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2909 WOODLAMD
618

City DES MOINES State IA Zip Code 50312-3885

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 ▼
650.00

Date of Receipt
MM / DD / YYYY
05 / 19 / 2017

Transaction ID : SA11A.505951

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. RILEY, RUTH, L., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2909 WOODLAMD
618

City DES MOINES State IA Zip Code 50312-3885

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 ▼
650.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2017

Transaction ID : SA11A.511152

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. RIORDAN, RICHARD, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10880 WILSHIRE BLVD STE 800

City LOS ANGELES State CA Zip Code 90024-4124

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 ▼
50000.00

Date of Receipt
MM / DD / YYYY
04 / 10 / 2017

Transaction ID : SA11A.500941

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50125.00
TOTAL This Period (last page this line number only).....	

**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 599 OF 1054
	<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)
Team Ryan

A. RISING, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6524 GARNET AVE

City PORT ARTHUR	State TX	Zip Code 77640-1310
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACTION RESTORATION INC.	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2017

Transaction ID : SA11A.503738

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RISING, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6524 GARNET AVE

City PORT ARTHUR	State TX	Zip Code 77640-1310
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACTION RESTORATION INC.	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2017

Transaction ID : SA11A.507472

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. RISING, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6524 GARNET AVE

City PORT ARTHUR	State TX	Zip Code 77640-1310
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACTION RESTORATION INC.	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2017

Transaction ID : SA11A.513204

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 600 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RITCH, PHILIP, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO STREET
 City KAILUA State HI Zip Code 96734-2144
 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 ▼ 215.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504813
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RITCH, PHILIP, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO STREET
 City KAILUA State HI Zip Code 96734-2144
 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 ▼ 215.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504814
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RITCH, PHILIP, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO STREET
 City KAILUA State HI Zip Code 96734-2144
 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 ▼ 215.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511398
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
TOTAL This Period (last page this line number only)..... ▶

**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 601 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RITCH, PHILIP, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO STREET
 City KAILUA State HI Zip Code 96734-2144
 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 ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512737
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. ROATH, MICHAEL, S., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ARNON RIDGE CT
 City GREAT FALLS State VA Zip Code 22066-3929
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2017
Transaction ID : SA11A.503744
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROATH, MICHAEL, S., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ARNON RIDGE CT
 City GREAT FALLS State VA Zip Code 22066-3929
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017
Transaction ID : SA11A.507476
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**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 602 OF 1054
<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)
Team Ryan

A. ROATH, MICHAEL, S., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 ARNON RIDGE CT

City GREAT FALLS	State VA	Zip Code 22066-3929
---------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2017

Transaction ID : SA11A.513228

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ROBERTS, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7373 BROADWAY ST., SUITE 406

City SAN ANTONIO	State TX	Zip Code 78209-3268
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COATES ENERGY	Occupation (for Individual) CO-TRUSTEE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2017

Transaction ID : SA11A.502728

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ROBERTS, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7373 BROADWAY ST., SUITE 406

City SAN ANTONIO	State TX	Zip Code 78209-3268
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COATES ENERGY	Occupation (for Individual) CO-TRUSTEE
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2017

Transaction ID : SA11A.505967

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 603 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. ROBERTS, WILLIAM, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5701 BURLESON OAKS DRIVE

City BURLESON	State TX	Zip Code 76028-1827
------------------	-------------	------------------------

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 ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2017

Transaction ID : SA11A.504514

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ROBERTS, WILLIAM, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5701 BURLESON OAKS DRIVE

City BURLESON	State TX	Zip Code 76028-1827
------------------	-------------	------------------------

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 ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2017

Transaction ID : SA11A.510779

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. RODGERS, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15287 TOP OF THE HILL CT

City LOS GATOS	State CA	Zip Code 95032-6535
-------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2017

Transaction ID : SA11A.503259

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**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 604 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Team Ryan

A. RODGERS, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15287 TOP OF THE HILL CT
 City LOS GATOS State CA Zip Code 95032-6535
 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 ▼ 600.00

Date of Receipt 05 / 25 / 2017
Transaction ID : SA11A.506714
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RODGERS, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15287 TOP OF THE HILL CT
 City LOS GATOS State CA Zip Code 95032-6535
 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 ▼ 600.00

Date of Receipt 06 / 25 / 2017
Transaction ID : SA11A.512700
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RODRIGUEZ, TECHY, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 769 HEATHER WAY
 City ANN ARBOR State MI Zip Code 48104-2731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.509053
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50200.00
TOTAL This Period (last page this line number only).....▶	

**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 605 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Team Ryan

A. ROEDER, RICHARD, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11150 SANTA MONICA BLVD #750
 City LOS ANGELES State CA Zip Code 90025-0528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VANCE STREET CAPITAL Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502980
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. ROESSL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1881 SW 52ND TER
 City PLANTATION State FL Zip Code 33317-6016
 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 ▼ 266.00

Date of Receipt 04 / 06 / 2017
Transaction ID : SA11A.501133
 Amount of Each Receipt this Period 16.00
 Memo Item CONTRIBUTION

C. ROESSL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1881 SW 52ND TER
 City PLANTATION State FL Zip Code 33317-6016
 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 ▼ 266.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506767
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25116.00
TOTAL This Period (last page this line number only).....	

**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 606 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROESSL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1881 SW 52ND TER
 City PLANTATION State FL Zip Code 33317-6016
 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 ▼ 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513716
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROLFSRUD, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4317 N FOXGLOVE DR. NW
 City GIG HARBOR State WA Zip Code 98332-8028
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506249
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ROLFSRUD, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4317 N FOXGLOVE DR. NW
 City GIG HARBOR State WA Zip Code 98332-8028
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017
Transaction ID : SA11A.507324
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**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 607 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROLFSRUD, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4317 N FOXGLOVE DR. NW
 City GIG HARBOR State WA Zip Code 98332-8028
 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 ▼ 450.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513487
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROOT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2402 NW BLUE RIDGE DRIVE
 City SEATTLE State WA Zip Code 98177-5432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GM NAMEPLATE Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501719
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROOT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2402 NW BLUE RIDGE DRIVE
 City SEATTLE State WA Zip Code 98177-5432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GM NAMEPLATE Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 13 / 2017
Transaction ID : SA11A.505777
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 608 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ROOT, DONALD, , ,		Date of Receipt
Mailing Address 2402 NW BLUE RIDGE DRIVE		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2017"/>
City SEATTLE	State WA	Zip Code 98177-5432
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.510277
Name of Employer (for Individual) GM NAMEPLATE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) CHAIRMAN		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ROOT, JAMES, W., MR.,		Date of Receipt
Mailing Address 215 ARMSTRONG DRIVE		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City GEORGETOWN	State TX	Zip Code 78633-5133
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.506497
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ROSENFELD, LEA, , ,		Date of Receipt
Mailing Address 7975 W 4TH ST		<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City LOS ANGELES	State CA	Zip Code 90048-4412
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.503494
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period <input type="text" value="75.00"/>
Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="275.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**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 609 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSENFELD, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7975 W 4TH ST
 City LOS ANGELES State CA Zip Code 90048-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507814
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. ROSENFELD, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7975 W 4TH ST
 City LOS ANGELES State CA Zip Code 90048-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512847
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. ROSENZWEIG, ROBIN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 N RODEO DR
 City BEVERLY HILLS State CA Zip Code 90210-3210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLFAX LAW OFFICE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 37500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508860
 Amount of Each Receipt this Period 37500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	37650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 610 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ROSENZWEIG, SAUL, L., MR.,

Mailing Address 1051 ANGELO DRIVE

City BEVERLY HILLS	State CA	Zip Code 90210-2747
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RZ GROUP	Occupation (for Individual) INVESTOR
---	---

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
04		10		2017

Transaction ID : SA11A.501321

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ROSIER, W. GRADY, , MR.,

Mailing Address PO BOX 975

City SALADO	State TX	Zip Code 76571-0975
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCLANE COMPANY	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11A.508962

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ROSKI, EDWARD, P., , JR.

Mailing Address 13191 CROSSROADS PARKWAY N

City CITY OF INDUSTRY	State CA	Zip Code 91746-3421
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAJESTY REALTY CO.	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2017

Transaction ID : SA11A.502900

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55100.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 611 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSSEAU, SAUL, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3817 LOCHRIDGE RD
 City NORTH LITTLE ROCK State AR Zip Code 72116-8329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504705
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ROUGH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 W. MILLING ST.
 City LANCASTER State CA Zip Code 93534-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LM Occupation (for Individual) SA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 27 / 2017
Transaction ID : SA11A.503530
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROUGH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 W. MILLING ST.
 City LANCASTER State CA Zip Code 93534-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LM Occupation (for Individual) SA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507787
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 612 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUGH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 W. MILLING ST.
 City LANCASTER State CA Zip Code 93534-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LM Occupation (for Individual) SA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512824
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE 29
 City CLEARWATER State FL Zip Code 33763-3276
 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 ▼ 250.00

Date of Receipt 04 / 15 / 2017
Transaction ID : SA11A.502451
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE 29
 City CLEARWATER State FL Zip Code 33763-3276
 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 ▼ 250.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503321
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**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 613 OF 1054
	<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)
Team Ryan

A. ROUNDS, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2459 FRANCISCAN DRIVE
29

City CLEARWATER State FL Zip Code 33763-3276

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 ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2017

Transaction ID : SA11A.505702

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. ROUNDS, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2459 FRANCISCAN DRIVE
29

City CLEARWATER State FL Zip Code 33763-3276

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 ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2017

Transaction ID : SA11A.510812

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. ROUNDS, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2459 FRANCISCAN DRIVE
29

City CLEARWATER State FL Zip Code 33763-3276

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 ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2017

Transaction ID : SA11A.511835

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**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 614 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE
 29
 City CLEARWATER State FL Zip Code 33763-3276
 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 ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513560
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ROUSEY, JAMES, P., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10750 KY HWY 78
 City HUSTONVILLE State KY Zip Code 40437-8530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UTG Occupation (for Individual) FINANCIAL SERVICES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.510558
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. ROWE, TIMOTHY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12054 SILVER SHORE CT
 City INDIANAPOLIS State IN Zip Code 46236-8996
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROWE AND HAMILTON Occupation (for Individual) ATTORNEY
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2017
Transaction ID : SA11A.504167
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3725.00
TOTAL This Period (last page this line number only).....▶	

**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 615 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROWELL, DARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2743 NW 18TH ST
 City OKLAHOMA CITY State OK Zip Code 73107-3934
 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 ▼ 300.00

Date of Receipt 04 / 06 / 2017
Transaction ID : SA11A.501306
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. ROWELL, DARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2743 NW 18TH ST
 City OKLAHOMA CITY State OK Zip Code 73107-3934
 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 ▼ 300.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.503160
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RUBEL, JANICE, B., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 S BAYSHORE DRIVE APT. 68
 City MIAMI State FL Zip Code 33133-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) JEWELRY SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501618
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**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 616 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUCHARD, GREYNELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BIX 2196
 City RANCH SANTA FE State CA Zip Code 92067-
 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 ▼ 985.00

Date of Receipt **04 / 13 / 2017**
Transaction ID : SA11A.501705
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 CHARGED BACK \$15.00 ON 05/31/2017

B. RUCHARD, GREYNELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BIX 2196
 City RANCH SANTA FE State CA Zip Code 92067-
 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 ▼ 985.00

Date of Receipt **05 / 31 / 2017**
Transaction ID : SA11A.508723
 Amount of Each Receipt this Period - 15.00
 Memo Item CONTRIBUTION
 CHARGED BACK

C. RUCKER, ROSS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 CENTER ST
 City LITTLE ROCK State AR Zip Code 72201-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS INC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 08 / 2017**
Transaction ID : SA11A.504489
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 735.00
TOTAL This Period (last page this line number only)..... ▶

**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 617 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUDGE, HOWARD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9301 E CRYSTAL DRIVE
 City SUN LAKES State AZ Zip Code 85248-0837
 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 ▼ 300.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505192
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. RUPRECHT, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 SHERWOOD AVE
 City GREENWICH State CT Zip Code 06831-3250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504158
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. RUSSELL, RANDALL, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 SWINKS MILL RD
 City MCLEAN State VA Zip Code 22102-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510555
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	51150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 618 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, THOMAS, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12607 S 12TH STREET
 City JENKS State OK Zip Code 74037-4993
 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 ▼ 247700.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512425
 Amount of Each Receipt this Period 3000.00
 Memo Item CONTRIBUTION
 REFUNDED \$3,000.00 ON 06/27/2017

B. RUTLEDGE, PUD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1132
 City SAN MARCOS State TX Zip Code 78667-1132
 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 ▼ 300.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503385
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RUTLEDGE, PUD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1132
 City SAN MARCOS State TX Zip Code 78667-1132
 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 ▼ 300.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503386
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3200.00
TOTAL This Period (last page this line number only)..... ▶

**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 619 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUTLEDGE, PUD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1132
 City SAN MARCOS State TX Zip Code 78667-1132
 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 ▼ 300.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503387
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RUTLEDGE, REYNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1009
 City SEARCY State AR Zip Code 72145-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST SECURITY BANK Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504653
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. RYOU, KAP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 LANE
 City ORLAND PARK State IL Zip Code 60462-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 09 / 2017
Transaction ID : SA11A.501390
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25150.00
TOTAL This Period (last page this line number only).....	

**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 620 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYOU, KAP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 LANE
 City ORLAND PARK State IL Zip Code 60462-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2017
Transaction ID : SA11A.505331
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RYOU, KAP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 LANE
 City ORLAND PARK State IL Zip Code 60462-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2017
Transaction ID : SA11A.509714
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 25 69TH PL
 City MASPETH State NY Zip Code 11378-
 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 ▼ 357.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : SA11A.500568
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 621 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 25 69TH PL
 City MASPETH State NY Zip Code 11378-
 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 ▼ 357.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11A.504452
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 25 69TH PL
 City MASPETH State NY Zip Code 11378-
 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 ▼ 357.00

Date of Receipt 05 / 17 / 2017
Transaction ID : SA11A.505912
 Amount of Each Receipt this Period 33.00
 Memo Item CONTRIBUTION

C. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 25 69TH PL
 City MASPETH State NY Zip Code 11378-
 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 ▼ 357.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507735
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	88.00
TOTAL This Period (last page this line number only).....▶	

**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 622 OF 1054
	<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)
Team Ryan

A. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 25 69TH PL
 City MASPETH State NY Zip Code 11378-
 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 ▼ 357.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513525
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. SALAM, GOHAR, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 615 TAWNEY CT
 City HUNTERTOWN State IN Zip Code 46748-9292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 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
 05 / 26 / 2017
Transaction ID : SA11A.506599
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. SAMMONS, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ELLIOTT STREET
 City BEAUFORT State SC Zip Code 29902-5217
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2017
Transaction ID : SA11A.502459
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 623 OF 1054
(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)
Team Ryan

A. SAMMONS, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ELLIOTT STREET
 City BEAUFORT State SC Zip Code 29902-5217
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.505710
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SAMMONS, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ELLIOTT STREET
 City BEAUFORT State SC Zip Code 29902-5217
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2017
Transaction ID : SA11A.510819
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SAMPLE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 GREYSTONE LN
 City SUDBURY State MA Zip Code 01776-1396
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICROSOFT CORP. Occupation (for Individual) FINANCIAL MANGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.505657
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 624 OF 1054
(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)
Team Ryan

A. SAN AGUSTIN, FE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27074 WARNER AVENUE

City WARREN	State MI	Zip Code 48092-2840
----------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2017

Transaction ID : SA11A.501709

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SAN AGUSTIN, FE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27074 WARNER AVENUE

City WARREN	State MI	Zip Code 48092-2840
----------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2017

Transaction ID : SA11A.505770

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SAN AGUSTIN, FE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27074 WARNER AVENUE

City WARREN	State MI	Zip Code 48092-2840
----------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2017

Transaction ID : SA11A.510271

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 625 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAND, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3370 NANEUM RD
 City ELLENSBURG State WA Zip Code 98926-6964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBGYN OF ELLENSBURG Occupation (for Individual) BUSINESS ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11A.500708
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SAND, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3370 NANEUM RD
 City ELLENSBURG State WA Zip Code 98926-6964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBGYN OF ELLENSBURG Occupation (for Individual) BUSINESS ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11A.503836
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SAND, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3370 NANEUM RD
 City ELLENSBURG State WA Zip Code 98926-6964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBGYN OF ELLENSBURG Occupation (for Individual) BUSINESS ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11A.508099
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 626 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDERS, TAWNY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10659 BELLAGIO RD
 City LOS ANGELES State CA Zip Code 90077-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 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
 04 / 10 / 2017
Transaction ID : SA11A.500954
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

B. SANDERS, WALTER, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10659 BELLAGIO ROAD
 City LOS ANGELES State CA Zip Code 90077-3712
 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 ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2017
Transaction ID : SA11A.500935
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. SANTIAGO, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 LANGDON STREET
 City SPRINGFIELD State MA Zip Code 01104-1913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAYSTATE MEDICAL CENTER Occupation (for Individual) R.N.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503509
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50025.00
TOTAL This Period (last page this line number only).....▶	

**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 627 OF 1054
<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)
Team Ryan

A. SANTIAGO, FRANCES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10 LANGDON STREET

City SPRINGFIELD	State MA	Zip Code 01104-1913
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BAYSTATE MEDICAL CENTER	Occupation (for Individual) R.N.
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : SA11A.505373

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SANTIAGO, FRANCES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10 LANGDON STREET

City SPRINGFIELD	State MA	Zip Code 01104-1913
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BAYSTATE MEDICAL CENTER	Occupation (for Individual) R.N.
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2017

Transaction ID : SA11A.507822

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SANTIAGO, FRANCES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10 LANGDON STREET

City SPRINGFIELD	State MA	Zip Code 01104-1913
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BAYSTATE MEDICAL CENTER	Occupation (for Individual) R.N.
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2017

Transaction ID : SA11A.510061

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**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 628 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANTIAGO, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 LANGDON STREET
 City SPRINGFIELD State MA Zip Code 01104-1913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAYSTATE MEDICAL CENTER Occupation (for Individual) R.N.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512876
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SAPIENZA, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2209 LAKEHURST RD.
 City SPICEWOOD State TX Zip Code 78669-6895
 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 ▼ 500.00

Date of Receipt 04 / 15 / 2017
Transaction ID : SA11A.502466
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SAPIENZA, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2209 LAKEHURST RD.
 City SPICEWOOD State TX Zip Code 78669-6895
 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 ▼ 500.00

Date of Receipt 04 / 15 / 2017
Transaction ID : SA11A.502467
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**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 629 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUNDERS, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1032 CORONADO LANE

City LYNCHBURG	State VA	Zip Code 24502-1720
-------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2017

Transaction ID : SA11A.501462

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 1032 CORONADO LANE

City LYNCHBURG	State VA	Zip Code 24502-1720
-------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2017

Transaction ID : SA11A.504141

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SAUNDERS, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1032 CORONADO LANE

City LYNCHBURG	State VA	Zip Code 24502-1720
-------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2017

Transaction ID : SA11A.504142

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 630 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SAUNDERS, NANCY, , ,

Mailing Address 1032 CORONADO LANE

City LYNCHBURG	State VA	Zip Code 24502-1720
-------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2017

Transaction ID : SA11A.511895

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SAWDEY, JEFFREY, , MR.,

Mailing Address 10951 COLD SPRINGS DR

City CENTERVILLE	State OH	Zip Code 45458-4514
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAWDEY SOLUTION SERVICES	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : SA11A.505692

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCALES, JOHN, , ,

Mailing Address 23 HUNTING COUNTRY ROAD

City TRYON	State NC	Zip Code 28782-9675
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNTHETEX, LLC	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2017

Transaction ID : SA11A.504111

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 631 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. SCALES, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 HUNTING COUNTRY ROAD

City TRYON State NC Zip Code 28782-9675

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNTHETEX, LLC Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2017

Transaction ID : SA11A.507549

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SCALES, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 HUNTING COUNTRY ROAD

City TRYON State NC Zip Code 28782-9675

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYNTHETEX, LLC Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017

Transaction ID : SA11A.513315

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SCANLON, KEVIN, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5524 N GRANDVIEW ST

City LITTLE ROCK State AR Zip Code 72207-1912

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEPHENS INC. Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017

Transaction ID : SA11A.504716

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

**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 632 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SCHAEFER, PETER, R., MR.,			Date of Receipt MM / DD / YYYY 06 / 16 / 2017
Mailing Address 9021 DANCY TREE CT			Transaction ID : SA11A.510559
City ORLANDO	State FL	Zip Code 32836-5059	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) HANNAVER LIFE REINSURANCE		Occupation (for Individual) PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SCHELLHAS, ROBERT, J., MR.,			Date of Receipt MM / DD / YYYY 04 / 02 / 2017
Mailing Address 2639 N ROOSEVELT ST			Transaction ID : SA11A.500801
City ARLINGTON	State VA	Zip Code 22207-1011	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ERNST & YOUNG		Occupation (for Individual) CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SCHIFF, THOMAS, R., MR.,			Date of Receipt MM / DD / YYYY 05 / 08 / 2017
Mailing Address 4 GRANDIN TERRACE			Transaction ID : SA11A.504320
City CINCINNATI	State OH	Zip Code 45208-3405	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SCHIFF INSURANCE		Occupation (for Individual) CHARIMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10000.00		

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 633 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
Team Ryan

A. SCHIFF, THOMAS, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 GRANDIN TERRACE

City CINCINNATI	State OH	Zip Code 45208-3405
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHIFF INSURANCE	Occupation (for Individual) CHARIMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11A.505668

Amount of Each Receipt this Period
7500.00

Memo Item
CONTRIBUTION

B. SCHILLECI, CHARLES, MICHAEL, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 57 OVERBROOK RD

City MOUNTAIN BRK	State AL	Zip Code 35213-4333
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUPREME BEVERAGE CO	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2017

Transaction ID : SA11A.510641

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. SCHILDT, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W 1454 S SHORE DR.

City EAST TROY	State WI	Zip Code 53120-2102
-------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2017

Transaction ID : SA11A.503130

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12550.00
TOTAL This Period (last page this line number only).....	

**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 634 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHILDT, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W 1454 S SHORE DR.
 City EAST TROY State WI Zip Code 53120-2102
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506279
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHILDT, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W 1454 S SHORE DR.
 City EAST TROY State WI Zip Code 53120-2102
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2017
Transaction ID : SA11A.512274
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHILDKNECHT, RAINER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 WOODLAWN AVE
 City WINNETKA State IL Zip Code 60093-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503936
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**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 635 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHILDKNECHT, RAINER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 WOODLAWN AVE
 City WINNETKA State IL Zip Code 60093-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 17 / 2017
Transaction ID : SA11A.505803
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHILDKNECHT, RAINER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 WOODLAWN AVE
 City WINNETKA State IL Zip Code 60093-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507280
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SCHILDKNECHT, RAINER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 WOODLAWN AVE
 City WINNETKA State IL Zip Code 60093-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513679
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**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 636 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLIFSKE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 GREENWAY TERRACE
 City ELM GROVE State WI Zip Code 53122-1611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504658
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. SCHLOEMER, JAMES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W134N8675 EXECUTIVE PARKWAY
 City MENOMONEE FALLS State WI Zip Code 53051-3310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL PROPERTIES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 22300.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504669
 Amount of Each Receipt this Period 22300.00
 Memo Item CONTRIBUTION

C. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 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 ▼ 270.00

Date of Receipt 04 / 18 / 2017
Transaction ID : SA11A.502533
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 47325.00
TOTAL This Period (last page this line number only)..... ▶

**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 637 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2017
Transaction ID : SA11A.503701
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017
Transaction ID : SA11A.507431
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SCHMIDT, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5550 E BIG ELM
 City TROY State TX Zip Code 76579-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTRAL NATIONAL BANK TEMPLE Occupation (for Individual) BANKING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2017
Transaction ID : SA11A.507922
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2575.00
TOTAL This Period (last page this line number only).....▶	

**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 638 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 388 GARDENS AVENUE
 City ATCO State NJ Zip Code 08004-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEARTLAND HOSPICE Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2017
Transaction ID : SA11A.502747
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SCHMIDT, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 388 GARDENS AVENUE
 City ATCO State NJ Zip Code 08004-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEARTLAND HOSPICE Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2017
Transaction ID : SA11A.505976
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SCHMIDT, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 388 GARDENS AVENUE
 City ATCO State NJ Zip Code 08004-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEARTLAND HOSPICE Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2017
Transaction ID : SA11A.511724
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 639 OF 1054		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMITZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ALYDAR COURT
 City NOKESVILLE State VA Zip Code 20181-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC. Occupation (for Individual) COMMODITY TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503970
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. SCHMITZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ALYDAR COURT
 City NOKESVILLE State VA Zip Code 20181-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC. Occupation (for Individual) COMMODITY TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503987
 Amount of Each Receipt this Period 59.00
 Memo Item
 CONTRIBUTION

C. SCHMITZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ALYDAR COURT
 City NOKESVILLE State VA Zip Code 20181-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC. Occupation (for Individual) COMMODITY TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507263
 Amount of Each Receipt this Period 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	143.00
TOTAL This Period (last page this line number only).....▶	

**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 640 OF 1054
	<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)
Team Ryan

A. SCHMITZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ALYDAR COURT
 City NOKESVILLE State VA Zip Code 20181-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC. Occupation (for Individual) COMMODITY TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt **05 / 31 / 2017**
Transaction ID : SA11A.508666
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHMITZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ALYDAR COURT
 City NOKESVILLE State VA Zip Code 20181-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC. Occupation (for Individual) COMMODITY TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt **06 / 30 / 2017**
Transaction ID : SA11A.513642
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. SCHMITZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ALYDAR COURT
 City NOKESVILLE State VA Zip Code 20181-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC. Occupation (for Individual) COMMODITY TRADER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt **06 / 30 / 2017**
Transaction ID : SA11A.513708
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	109.00
TOTAL This Period (last page this line number only).....▶	

**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 641 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCHNEIDER, RUSSELL, , MR.,

Mailing Address **PO BOX 876**

City **BELTON** State **TX** Zip Code **76513-0876**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RT SCHNEIDER CONSTRUCTION** Occupation (for Individual) **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **05 / 22 / 2017**

Transaction ID : SA11A.506023

Amount of Each Receipt this Period **2500.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCHOULTZ, ROBERT, , MR.,

Mailing Address **13840 N DESERT DR. 372**

City **PEORIA** State **AZ** Zip Code **85381-**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETITED** Occupation (for Individual) **RETIRE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **04 / 21 / 2017**

Transaction ID : SA11A.502849

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCHOULTZ, ROBERT, , MR.,

Mailing Address **13840 N DESERT DR. 372**

City **PEORIA** State **AZ** Zip Code **85381-**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETITED** Occupation (for Individual) **RETIRE**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **05 / 21 / 2017**

Transaction ID : SA11A.506301

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **2600.00**

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

**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 643 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHUH, KONYA, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2365 N PARKER DRIVE
 City JANESVILLE State WI Zip Code 53545-0715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504655
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. SCHUMANN, ERIC, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7312 DOUGLAS AVENUE
 City RACINE State WI Zip Code 53402-9543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERIT GEAR Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504652
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SCHWARTZ, MARY, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2386 E HERITAGE WAY SUITE B
 City SALT LAKE CITY State UT Zip Code 84109-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACHYONYCHIA CONGENITA PROJECT Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508924
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13000.00
TOTAL This Period (last page this line number only).....	

**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 644 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWENKER, ERICH, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7220 N BARNETT LANE
 City FOX POINT State WI Zip Code 53217-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTAR CAPITAL MANAGEMENT Occupation (for Individual) REAL ESTATE ASSET MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504646
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SCHWENK, THORNTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 EASTLAKE DR. SE
 City RIO RANCHO State NM Zip Code 87124-2161
 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 ▼ 300.00

Date of Receipt 04 / 24 / 2017
Transaction ID : SA11A.503086
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHWENK, THORNTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 EASTLAKE DR. SE
 City RIO RANCHO State NM Zip Code 87124-2161
 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 ▼ 300.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503937
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 645 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. SCULLY, WILLIAM, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 771 MANATEE COVE

City VERO BEACH	State FL	Zip Code 32963-3730
--------------------	-------------	------------------------

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 ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2017

Transaction ID : SA11A.502382

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. SCULLY, WILLIAM, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 771 MANATEE COVE

City VERO BEACH	State FL	Zip Code 32963-3730
--------------------	-------------	------------------------

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 ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : SA11A.505586

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. SCULLY, WILLIAM, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 771 MANATEE COVE

City VERO BEACH	State FL	Zip Code 32963-3730
--------------------	-------------	------------------------

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 ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2017

Transaction ID : SA11A.511148

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**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 646 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEEMAN, MICKEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2900 BROWNS LN
 City JONESBORO State AR Zip Code 72401-7237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : SA11A.504488
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. SEIBEL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 QUARRY DRIVE
 City WOODLAND PARK State NJ Zip Code 07424-4201
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.503276
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

C. SEIDEL, JOSEPH, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8058 GLENDALE ROAD
 City CHEVY CHASE State MD Zip Code 20815-5901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CREDIT SUISSE SECURITIES USA Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.510552
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15055.00
TOTAL This Period (last page this line number only).....	

**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 647 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6641 DEARBORN DRIVE
 City MISSION State KS Zip Code 66202-4246
 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 ▼ 500.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505648
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO.. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.501112
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO.. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11A.504465
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 648 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO.. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506542
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO.. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506543
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO.. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11A.508747
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**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 649 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO.. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512884
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHAIKH, KHURRUM, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 TRANQUIL CT
 City FT. WAYNE State IN Zip Code 46804-7878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506603
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SHAPIRO, STEVEN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 KIMBALLWOOD LANE
 City HIGHLAND PARK State IL Zip Code 60035-3623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SF INVESTMENTS Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507927
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1275.00
TOTAL This Period (last page this line number only).....	

**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 650 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHARP, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2959 HOMESTEAD DR.
 City EDGEWOOD State KY Zip Code 41017-2563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) G. SHARPCO, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 27 / 2017**
Transaction ID : SA11A.503472
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. SHARP, REX, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3604 W 71ST ST
 City PRAIRIE VILLAGE State KS Zip Code 66208-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REX A. SHARP, PA Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **06 / 02 / 2017**
Transaction ID : SA11A.507931
 Amount of Each Receipt this Period 2700.00
 Memo Item
CONTRIBUTION

C. SHAW, ALAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 HAMBLETONIAN DRIVE
 City COLTS NECK State NJ Zip Code 07722-2121
 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 ▼ 700.00

Date of Receipt **04 / 04 / 2017**
Transaction ID : SA11A.501063
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3800.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 651 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAW, ALAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 HAMBLETONIAN DRIVE
 City COLTS NECK State NJ Zip Code 07722-2121
 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 ▼ 700.00

Date of Receipt **04 / 29 / 2017**
Transaction ID : SA11A.504056
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHAW, ALAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 HAMBLETONIAN DRIVE
 City COLTS NECK State NJ Zip Code 07722-2121
 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 ▼ 700.00

Date of Receipt **05 / 04 / 2017**
Transaction ID : SA11A.504306
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHAW, ALAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 HAMBLETONIAN DRIVE
 City COLTS NECK State NJ Zip Code 07722-2121
 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 ▼ 700.00

Date of Receipt **06 / 04 / 2017**
Transaction ID : SA11A.508774
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**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 652 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAW, F., BARRY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 BEAR CREEK ROAD
 City ELIZABETHTOWN State PA Zip Code 17022-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE WENGER GROUP Occupation (for Individual) EXEC CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.505189
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

B. SHAW, F., BARRY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 BEAR CREEK ROAD
 City ELIZABETHTOWN State PA Zip Code 17022-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE WENGER GROUP Occupation (for Individual) EXEC CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.512980
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. SHAW, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 SOUTH SIXTH STREET SUITE 110
 City KLAMATH FALLS State OR Zip Code 97603-4759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLMAN PREMIER REALTY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2017
Transaction ID : SA11A.501353
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15250.00
TOTAL This Period (last page this line number only).....	

**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 653 OF 1054
	<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)
Team Ryan

A. SHAW, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3815 SOUTH SIXTH STREET SUITE 110

City KLAMATH FALLS	State OR	Zip Code 97603-4759
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOLMAN PREMIER REALTY	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2017

Transaction ID : SA11A.505350

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. SHAW, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3815 SOUTH SIXTH STREET SUITE 110

City KLAMATH FALLS	State OR	Zip Code 97603-4759
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOLMAN PREMIER REALTY	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 10 / 2017

Transaction ID : SA11A.510076

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. SHEA, MICHAEL, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 OLD MONTICELLO RD

City THOMASVILLE	State GA	Zip Code 31792-6716
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FERNLEAF INVESTMENTS	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2017

Transaction ID : SA11A.506596

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**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 654 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEETZ, JOSEPH, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 LINBROOK LN
 City ALTOONA State PA Zip Code 16601-7707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHEETZ INC Occupation (for Individual) PRESIDENT AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.502952
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

B. SHEETZ, STANTON, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5700 6TH AVE
 City ALTOONA State PA Zip Code 16602-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHEETZ INC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.502951
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

C. SHEETZ, STEPHEN, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5700 SIXTH AVE
 City ALTOONA State PA Zip Code 16602-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHEETZ FAMILY COUNCIL Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.502953
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	30000.00
TOTAL This Period (last page this line number only).....▶	

**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 655 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHELTON, GARLYN, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 548
 City TEMPLE State TX Zip Code 76503-0548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.513028
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. SHEPLER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 174 APPLEDALE LANE
 City INDIANA State PA Zip Code 15701-6357
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503513
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SHEPLER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 174 APPLEDALE LANE
 City INDIANA State PA Zip Code 15701-6357
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2017
Transaction ID : SA11A.507828
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5100.00
TOTAL This Period (last page this line number only).....	

**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 656 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEPLER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 174 APPLIEDALE LANE
 City INDIANA State PA Zip Code 15701-6357
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2017
Transaction ID : SA11A.512869
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SHERWOOD, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10650 NE 9TH PLACE #1721
 City BELLEVUE State WA Zip Code 98004-5074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICROSOFT Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502357
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SHIELY, JOHN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15270 BRIARIDGE CT
 City ELM GROVE State WI Zip Code 53122-2003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2017
Transaction ID : SA11A.504649
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2650.00
TOTAL This Period (last page this line number only).....	

**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 657 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIELDS, VIRGINIA, P., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6740 EPPING FOREST WAY N
 APT. 107
 City JACKSONVILLE State FL Zip Code 32217-2676
 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 06 / 29 / 2017
Transaction ID : SA11A.512971
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SHINE, HUGH, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 793
 City TEMPLE State TX Zip Code 76503-0793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS FARGO ADVISORS Occupation (for Individual) FINANCIAL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504778
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. SHINE, J.R., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1407
 City NEW ALBANY State IN Zip Code 47151-1407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504676
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	

**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 658 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHINKAY, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11946 N. ST. RD. 26
 City FORT ATKINSON State WI Zip Code 53538-9403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURANT OWNER/LANLORD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2017
Transaction ID : SA11A.501369
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SHINKAY, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11946 N. ST. RD. 26
 City FORT ATKINSON State WI Zip Code 53538-9403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURANT OWNER/LANLORD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2017
Transaction ID : SA11A.505360
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SHINKAY, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11946 N. ST. RD. 26
 City FORT ATKINSON State WI Zip Code 53538-9403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURANT OWNER/LANLORD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2017
Transaction ID : SA11A.510087
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 659 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIVER, ALLEN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 MEANDER TRACE
 City THOMASVILLE State GA Zip Code 31792-8697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLOWERS FOODS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504774
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. SHORT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEST LANCASTER RD
 City HAYDEN State ID Zip Code 83835-8601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRY SHORT CABINETS & MILLWORK Occupation (for Individual) CABINETMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 882.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2017
Transaction ID : SA11A.503496
 Amount of Each Receipt this Period
 147.00
 Memo Item
 CONTRIBUTION

C. SHORT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEST LANCASTER RD
 City HAYDEN State ID Zip Code 83835-8601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRY SHORT CABINETS & MILLWORK Occupation (for Individual) CABINETMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 882.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2017
Transaction ID : SA11A.507810
 Amount of Each Receipt this Period
 147.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2794.00
TOTAL This Period (last page this line number only)..... ▶

**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 660 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHORT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEST LANCASTER RD
 City HAYDEN State ID Zip Code 83835-8601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRY SHORT CABINETS & MILLWORK Occupation (for Individual) CABINETMAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 882.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512845
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

B. SHORT, MARY, PORTIA, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 PLEASANT HILLS DR
 City RUSSELLVILLE State AR Zip Code 72802-7950
 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 ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504684
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SIEBENTHALER, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 CATALPA DR
 City DAYTON State OH Zip Code 45405-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) NURSERYMAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.506027
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3147.00
TOTAL This Period (last page this line number only).....	

**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 661 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMONS, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5915 DELOACHE AVENUE
 City DALLAS State TX Zip Code 75225-3006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 105000.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502771
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. SIMMONS, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5915 DELOACHE AVENUE
 City DALLAS State TX Zip Code 75225-3006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 105000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512949
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. SIMMONS, LAURENCE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS ST STE 6600 SUITE 6600
 City HOUSTON State TX Zip Code 77002-2921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCF PARTNERS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.500868
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	205000.00
TOTAL This Period (last page this line number only).....	

**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 662 OF 1054
	<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)
Team Ryan

A. SIMMONS, WILLIAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3545 NORTH UTAH ST

City ARLINGTON	State VA	Zip Code 22207-4444
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOTKA GR	Occupation (for Individual) GOVERNMENT AFFAIRS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2017

Transaction ID : SA11A.508253

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. SIMONS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1602 W. KIOWA

City COLORADO SPRINGS	State CO	Zip Code 80904-3530
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLORADO COLLEGE	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2017

Transaction ID : SA11A.501291

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SIMONS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1602 W. KIOWA

City COLORADO SPRINGS	State CO	Zip Code 80904-3530
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLORADO COLLEGE	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2017

Transaction ID : SA11A.505291

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 663 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. SIMONS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1602 W. KIOWA

City COLORADO SPRINGS	State CO	Zip Code 80904-3530
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLORADO COLLEGE	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017

Transaction ID : SA11A.509352

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SIMPOSON, JOSEPH, WARREN, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2211 BEECHWOOD ST

City LITTLE ROCK	State AR	Zip Code 72207-2023
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2017

Transaction ID : SA11A.504714

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. SIMPSON, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 949 SAGAMORE WAY

City VICTOR	State NY	Zip Code 14564-1293
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) XEROX	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2017

Transaction ID : SA11A.507556

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**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 664 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMPSON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 949 SAGAMORE WAY
 City VICTOR State NY Zip Code 14564-1293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XEROX Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 29 / 2017
Transaction ID : SA11A.507557
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. SIMPSON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 949 SAGAMORE WAY
 City VICTOR State NY Zip Code 14564-1293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XEROX Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.513288
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. SINNOTT, J WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 N ALDER SPRINGS DR.
 City ORO VALLEY State AZ Zip Code 85737-9494
 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 ▼ 3000.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502853
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**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 665 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SINNOTT, J WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 N ALDER SPRINGS DR.
 City ORO VALLEY State AZ Zip Code 85737-9494
 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 ▼ 3000.00

Date of Receipt 05 / 21 / 2017
Transaction ID : SA11A.506308
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SINNOTT, J WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 N ALDER SPRINGS DR.
 City ORO VALLEY State AZ Zip Code 85737-9494
 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 ▼ 3000.00

Date of Receipt 06 / 21 / 2017
Transaction ID : SA11A.512224
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 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 ▼ 490.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501550
 Amount of Each Receipt this Period 53.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1053.00
TOTAL This Period (last page this line number only).....▶	

**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 666 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 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 ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : SA11A.504999
 Amount of Each Receipt this Period
 53.00
 Memo Item
 CONTRIBUTION

B. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 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 ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11A.505787
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 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 ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2017
Transaction ID : SA11A.507551
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	128.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 667 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 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 ▼ 490.00

Date of Receipt 06 / 15 / 2017
Transaction ID : SA11A.510518
 Amount of Each Receipt this Period 106.00
 Memo Item CONTRIBUTION

B. SLATERY, CHARLES, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 S MENDENHALL RD STE 200
 City MEMPHIS State TN Zip Code 38117-4232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NFC INVESTMENTS Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512051
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. SLOAN, JEFFREY, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3550 LENOX RD 30TH FLOOR
 City ATLANTA State GA Zip Code 30326-1298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL PAYMENTS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502984
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 12606.00
TOTAL This Period (last page this line number only)..... ▶

**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 668 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLOAN, O., TEMPLE, , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 FALLS OF NEUSE RD STE 150
 City RALEIGH State NC Zip Code 27609-5490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL PARTS INTERNATIONAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504324
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. SMICK, DAVID, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 I ST NE, STE 200
 City WASHINGTON State DC Zip Code 20002-4364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSON SMICK INTERNATIONAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500943
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION

C. SMICK, VICKI, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 I ST NE STE 200
 City WASHINGTON State DC Zip Code 20002-4364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VDF Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500946
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55000.00
TOTAL This Period (last page this line number only).....	

**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 669 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMILEY, EARL, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 764

City BRUNSWICK	State GA	Zip Code 31521-0764
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2017

Transaction ID : SA11A.501660

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SMILEY, EARL, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 764

City BRUNSWICK	State GA	Zip Code 31521-0764
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : SA11A.504919

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

C. SMILEY, EARL, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 764

City BRUNSWICK	State GA	Zip Code 31521-0764
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2017

Transaction ID : SA11A.512540

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 670 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, BOYD, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3260 ASH STREET
 City PALO ALTO State CA Zip Code 94306-2239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WSJ PROPERTIES Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500940
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. SMITH, DANIEL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 SEMINOLE LA
 City GREEN BAY State WI Zip Code 54313-4950
 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 ▼ 600.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503928
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SMITH, DANIEL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 SEMINOLE LA
 City GREEN BAY State WI Zip Code 54313-4950
 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 ▼ 600.00

Date of Receipt 05 / 30 / 2017
Transaction ID : SA11A.507292
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50200.00
TOTAL This Period (last page this line number only)..... ▶

**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 671 OF 1054
	<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)
Team Ryan

A. SMITH, DANIEL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 SEMINOLE LA
 City GREEN BAY State WI Zip Code 54313-4950
 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 ▼ 600.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513638
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SMITH, DAVID, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6539 MOORINGS POINT CIRCLE UNIT 201
 City BRADENTON State FL Zip Code 34202-1224
 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 04 / 26 / 2017
Transaction ID : SA11A.503308
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SMITH, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 WEST 5TH STREET
 City FORT WORTH State TX Zip Code 76107-1617
 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 ▼ 500.00

Date of Receipt 04 / 06 / 2017
Transaction ID : SA11A.501196
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 672 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. SMITH, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 WEST 5TH STREET
 City FORT WORTH State TX Zip Code 76107-1617
 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 ▼ 500.00

Date of Receipt 05 / 06 / 2017
Transaction ID : SA11A.505300
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SMITH, JAMES, F., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6539 S. NORTHSHORE DR.
 City KNOXVILLE State TN Zip Code 37919-8651
 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 ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508938
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. SMITH, MORGAN, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 FOX DALE LN
 City KNOXVILLE State TN Zip Code 37934-7455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSOLIDATED NUCLEAR SECURITY Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508853
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5100.00
TOTAL This Period (last page this line number only).....	

**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 673 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, RAYMOND, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11421 SOMERVILLE DR
 City TEMPLE State TX Zip Code 76502-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIKES WHOLESALE Occupation (for Individual) FUEL DISTRIBUTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506063
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. SNELLING, GEORGE, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 BRAE BURNS DR
 City AUGUSTA State GA Zip Code 30907-9128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.505864
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. SNITH, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 MILAN. SUITE 1960
 City HOUSTON State TX Zip Code 77002-5350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH ISLAND OIL Occupation (for Individual) LANDMAN
 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
 04 / 21 / 2017
Transaction ID : SA11A.502872
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7600.00
TOTAL This Period (last page this line number only).....▶	

**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 674 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNITH, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 MILAN. SUITE 1960
 City HOUSTON State TX Zip Code 77002-5350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH ISLAND OIL Occupation (for Individual) LANDMAN
 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
 05 / 21 / 2017
Transaction ID : SA11A.506322
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SNITH, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 MILAN. SUITE 1960
 City HOUSTON State TX Zip Code 77002-5350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH ISLAND OIL Occupation (for Individual) LANDMAN
 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
 06 / 21 / 2017
Transaction ID : SA11A.512240
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SOBEL, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 740 PARK AVE
 City NEW YORK State NY Zip Code 10021-4251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DTF HOLDINGS Occupation (for Individual) FINANCE
 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
 05 / 24 / 2017
Transaction ID : SA11A.506088
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 675 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. SOIN, RAJESH, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 LIGHTHOUSE POINT
 City LONGBOAT KEY State FL Zip Code 34228-3917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOIN INTERNATIONAL Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.505673
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

B. SOLIS, RENEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10422 HUEBNER ROAD APT.# 2903
 City SAN ANTONIO State TX Zip Code 78240-1394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VETERANS ADMINISTRATION Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2017
Transaction ID : SA11A.501546
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SPETZLER, LEITHA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 OAK FOREST CT.
 City PORTOLA VALLEY State CA Zip Code 94028-8063
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506001
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 676 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SPETZLER, LEITHA, J., MRS.,

Mailing Address **2 OAK FOREST CT.**

City PORTOLA VALLEY	State CA	Zip Code 94028-8063
-------------------------------	--------------------	-------------------------------

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 ▼
650.00

Date of Receipt
06 / 30 / 2017

Transaction ID : SA11A.513573

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SPOGLI, GEORGIA, BETH, MRS.,

Mailing Address **11100 SANTA MONICA BLVD STE 1900**

City LOS ANGELES	State CA	Zip Code 90025-0525
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
04 / 10 / 2017

Transaction ID : SA11A.500953

Amount of Each Receipt this Period
12500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SPOGLI, RONALD, P., ,

Mailing Address **11100 SANTA MONICA BLVD STE 1900**

City LOS ANGELES	State CA	Zip Code 90025-0525
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FREEMAN SPOGLI AND CO	Occupation (for Individual) PRIVATE EQUITY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
04 / 10 / 2017

Transaction ID : SA11A.500947

Amount of Each Receipt this Period
12500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25050.00
TOTAL This Period (last page this line number only).....	

**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 677 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAI, DIAN, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 PINE STREET
 SUITE 1000
 City ABILENE State TX Zip Code 79601-5142
 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 ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504756
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

B. STANTON, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9400 N CENTRAL EXPRESSWAY #1304
 City DALLAS State TX Zip Code 75231-5047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STANTON LLP Occupation (for Individual) ATTORNEY
 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
 06 / 07 / 2017
Transaction ID : SA11A.509052
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2017
Transaction ID : SA11A.501231
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	35025.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 678 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 04 / 15 / 2017
Transaction ID : SA11A.502454
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505707
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 06 / 15 / 2017
Transaction ID : SA11A.510816
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**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 679 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAUFFER, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 WARWICK LANE
 City ROCKY RIVER State OH Zip Code 44116-2305
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11A.503052
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. STAUFFER, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 WARWICK LANE
 City ROCKY RIVER State OH Zip Code 44116-2305
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2017
Transaction ID : SA11A.506506
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. STEDMAN, STUART, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3354 CHEVY CHASE
 City HOUSTON State TX Zip Code 77019-3102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEDMAN WEST INTERESTS, INC Occupation (for Individual) EXECUTIVE
 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
 05 / 15 / 2017
Transaction ID : SA11A.504861
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 680 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEENROD, DEBORAH, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12000 GRIGSBY CHAPEL ROAD
 City KNOXVILLE State TN Zip Code 37934-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508944
 Amount of Each Receipt this Period 2500.00
 Memo Item
 CONTRIBUTION

B. STEERE, WILLIAM, C., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27471 HARBOR COVE CT
 City BONITA SPRINGS State FL Zip Code 34134-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIZER Occupation (for Individual) RETIRED CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.500870
 Amount of Each Receipt this Period 30000.00
 Memo Item
 CONTRIBUTION

C. STEINKAMP, JEFFREY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 98
 City ROCHESTER State VT Zip Code 05767-0098
 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 ▼ 2000.00

Date of Receipt 05 / 25 / 2017
Transaction ID : SA11A.506141
 Amount of Each Receipt this Period 2000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 34500.00
TOTAL This Period (last page this line number only)..... ▶

**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 681 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEIN, JOAN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 W DEAN ROAD
 City RIVER HILLS State WI Zip Code 53217-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504657
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. STEPHENS, GREGORY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10729 SUMMER HILL PL
 City FORT WAYNE State IN Zip Code 46814-9148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **STEPHENS MACHINE INC** Occupation (for Individual) **OWNER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504671
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. STEPHENSON, JAMES, E., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43326
 City ATLANTA State GA Zip Code 30336-0326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **YANCEY BROTHERS** Occupation (for Individual) **CHAIRMAN AND CEO**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505860
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	31000.00
TOTAL This Period (last page this line number only).....	

**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 682 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEPHENS, JOHN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6422 LUPTON DRIVE
 City DALLAS State TX Zip Code 75225-2321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T MANAGEMENT SERVICES LP Occupation (for Individual) SEVP & CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 20 / 2017
Transaction ID : SA11A.502687
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. STEPHENS, MITCHELL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 HURRICANE SHOALS RD
 City LAWRENCEVILLE State GA Zip Code 30046-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN D. STEPHENS, INC. Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505666
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. STEVENS, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MITO STREET
 City LADERA RANCH State CA Zip Code 92694-1803
 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 ▼ 500.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505128
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 683 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. STEWART, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 230 W SUNSET RD
#1307

City SAN ANTONIO State TX Zip Code 78209-2791

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 ▼
250.00

Date of Receipt
05 / 31 / 2017
Transaction ID : SA11A.508488

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. STEWART, VIRGINIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3201 WESTCREEK CIRCLE

City COLUMBIA State MO Zip Code 65203-0903

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 ▼
300.00

Date of Receipt
04 / 29 / 2017
Transaction ID : SA11A.504096

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. STEWART, VIRGINIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3201 WESTCREEK CIRCLE

City COLUMBIA State MO Zip Code 65203-0903

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 ▼
300.00

Date of Receipt
05 / 29 / 2017
Transaction ID : SA11A.507510

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 684 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STEWART, VIRGINIA, , ,

Mailing Address **3201 WESTCREEK CIRCLE**

City COLUMBIA	State MO	Zip Code 65203-0903
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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 ▼
300.00

Date of Receipt
06 / 29 / 2017

Transaction ID : SA11A.513294

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STOWERS, HARRY, W., MR., JR.

Mailing Address **8733 INLET DR**

City KNOXVILLE	State TN	Zip Code 37922-6459
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STOWERS MACHINERY CORPORATION	Occupation (for Individual) EXECUTIVE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
06 / 02 / 2017

Transaction ID : SA11A.507893

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STRASBURGER, GREGG, , MR.,

Mailing Address **PO BOX 2024**

City TEMPLE	State TX	Zip Code 76503-2024
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GSI	Occupation (for Individual) EXECUTIVE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
05 / 22 / 2017

Transaction ID : SA11A.506024

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	27550.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 685 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STRATMAN, JOHN, , ,
 Mailing Address P.O. BOX 127
 City PARKER State CO Zip Code 80134-0127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 25 / 2017**
Transaction ID : SA11A.503251
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STRATMAN, JOHN, , ,
 Mailing Address P.O. BOX 127
 City PARKER State CO Zip Code 80134-0127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 25 / 2017**
Transaction ID : SA11A.506702
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STRATMAN, JOHN, , ,
 Mailing Address P.O. BOX 127
 City PARKER State CO Zip Code 80134-0127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 25 / 2017**
Transaction ID : SA11A.512692
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**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 686 OF 1054
	<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)
Team Ryan

A. STRATAKIS, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 169 SUSSEX DR.

City MANHASSET	State NY	Zip Code 11030-3736
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : SA11A.504806

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. STREATER, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7716 BLUEBONNET LN

City TEMPLE	State TX	Zip Code 76502-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EXTRACO BANKS	Occupation (for Individual) BANKER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : SA11A.504776

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. STULTZ, MARY, N., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 DEERFIELD CIRCLE

City KINGWOOD	State WV	Zip Code 26537-1358
------------------	-------------	------------------------

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 ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2017

Transaction ID : SA11A.504564

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7700.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 687 OF 1054
(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)
Team Ryan

A. STULTZ, MARY, N., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 DEERFIELD CIRCLE
 City KINGWOOD State WV Zip Code 26537-1358
 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 ▼ 700.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510791
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SUBKO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 BLUEGRASS LANE
 City SHENANDOAH State IA Zip Code 51601-2511
 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 ▼ 300.00

Date of Receipt 04 / 11 / 2017
Transaction ID : SA11A.501497
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SUBKO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 BLUEGRASS LANE
 City SHENANDOAH State IA Zip Code 51601-2511
 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 ▼ 300.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11A.505383
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**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 688 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUBKO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 BLUEGRASS LANE
 City SHENANDOAH State IA Zip Code 51601-2511
 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 ▼ 300.00

Date of Receipt 06 / 11 / 2017
Transaction ID : SA11A.510059
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502885
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SUBOTIC, PREDRAG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 MIDLAND PKWY
 City JAMAICA State NY Zip Code 11432-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.504004
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**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 689 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUBRAMANIAM, BALOO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1504 E PROSPECT AVENUE
 City PONCA CITY State OK Zip Code 74604-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DRY CLEANERS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 07 / 2017
Transaction ID : SA11A.500968
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SURBER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3281 PRESTON SHORE DR.
 City HARRISONBURG State VA Zip Code 22801-4918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) STOCKBROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 18 / 2017
Transaction ID : SA11A.502572
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SURBER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3281 PRESTON SHORE DR.
 City HARRISONBURG State VA Zip Code 22801-4918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) STOCKBROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.505902
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 690 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. SURBER, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3281 PRESTON SHORE DR.

City HARRISONBURG	State VA	Zip Code 22801-4918
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDWARD JONES	Occupation (for Individual) STOCKBROKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2017

Transaction ID : SA11A.511762

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SUTTMAN, ROBERT, J., MR, III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9421 RIDINGS BLVD

City DAYTON	State OH	Zip Code 45458-9732
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EBS ASSET MANAGEMENT	Occupation (for Individual) INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : SA11A.506026

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. SWEENEY, GERARD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 187 STAMFORD AVE

City STAMFORD	State CT	Zip Code 06902-8013
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAIN CARBON INC	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : SA11A.506025

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12750.00
TOTAL This Period (last page this line number only).....	

**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 691 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWENSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 BRAKEFIELD DRIVE
 City JANESVILLE State WI Zip Code 53546-2241
 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 ▼ 250.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504654
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SWIFT, CHARLOTTE, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 CARA DRIVE
 City NANUET State NY Zip Code 10954-3701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTALBANO, CONDON & FRANK, P.C. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503402
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SWIFT, CHARLOTTE, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 CARA DRIVE
 City NANUET State NY Zip Code 10954-3701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTALBANO, CONDON & FRANK, P.C. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506860
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**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 692 OF 1054
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIFT, CHARLOTTE, G., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 CARA DRIVE

City NANUET State NY Zip Code 10954-3701

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONTALBANO, CONDON & FRANK, P.C. Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512652

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. SWITZER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2100 COUNTRY CLUB ROAD APT 1200

City JACKSONVILLE State NC Zip Code 28546-3224

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 ▼ 300.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.501007

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. SWITZER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2100 COUNTRY CLUB ROAD APT 1200

City JACKSONVILLE State NC Zip Code 28546-3224

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 ▼ 300.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11A.504952

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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

**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 693 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWITZER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 COUNTRY CLUB ROAD
 APT 1200
 City JACKSONVILLE State NC Zip Code 28546-3224
 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 ▼ 300.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510798
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SYKES, TRACY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1827 WESTRIDGE RD
 City LOS ANGELES State CA Zip Code 90049-2215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504783
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. SZEGLIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 PARK AVENUE
 City BLUE POINT State NY Zip Code 11715-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501707
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25200.00
TOTAL This Period (last page this line number only).....▶	

**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 694 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SZEGLIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 PARK AVENUE
 City BLUE POINT State NY Zip Code 11715-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502370
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SZEGLIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 PARK AVENUE
 City BLUE POINT State NY Zip Code 11715-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2017
Transaction ID : SA11A.505757
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SZEGLIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 PARK AVENUE
 City BLUE POINT State NY Zip Code 11715-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2017
Transaction ID : SA11A.505852
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 695 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SZEGLIN, CHARLES, , ,

Mailing Address **73 PARK AVENUE**

City BLUE POINT	State NY	Zip Code 11715-1040
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KC	Occupation (for Individual) MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
06 / 13 / 2017

Transaction ID : SA11A.510264

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SZEGLIN, CHARLES, , ,

Mailing Address **73 PARK AVENUE**

City BLUE POINT	State NY	Zip Code 11715-1040
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KC	Occupation (for Individual) MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
06 / 17 / 2017

Transaction ID : SA11A.511769

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TABOLA, JOHN, B., ,

Mailing Address **1936 RICE BLVD**

City HOUSTON	State TX	Zip Code 77005-1635
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FREPORT LNG	Occupation (for Individual) ATTORNEY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 29 / 2017

Transaction ID : SA11A.513026

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 696 OF 1054
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TALARICO, FIORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6710 AUDEN STREET
 City HOUSTON State TX Zip Code 77005-4306
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503414
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. TALARICO, FIORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6710 AUDEN STREET
 City HOUSTON State TX Zip Code 77005-4306
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506867
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. TALARICO, FIORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6710 AUDEN STREET
 City HOUSTON State TX Zip Code 77005-4306
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512658
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 697 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TALBERT, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 VICTORIA LN
 SUITE 100
 City MANDEVILLE State LA Zip Code 70471-7259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TALSON-INC.COM Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 02 / 2017
Transaction ID : SA11A.500657
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TALBERT, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 VICTORIA LN
 SUITE 100
 City MANDEVILLE State LA Zip Code 70471-7259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TALSON-INC.COM Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501725
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TALBERT, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 VICTORIA LN
 SUITE 100
 City MANDEVILLE State LA Zip Code 70471-7259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TALSON-INC.COM Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 13 / 2017
Transaction ID : SA11A.505761
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**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 698 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. TAMASI, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5435 30TH PL NW
 City WASHINGTON State DC Zip Code 20015-1251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RASKY BAERLEIN Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2017
Transaction ID : SA11A.500796
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. TAPIA, DONALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4805 E ROADRUNNER RD
 City PARADISE VALLEY State AZ Zip Code 85253-3020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2017
Transaction ID : SA11A.502961
 Amount of Each Receipt this Period
 12500.00
 Memo Item
 CONTRIBUTION

C. TARAFDER, ABU, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 CLARKE STREET
 City BRENTWOOD State NY Zip Code 11717-2024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LNK INTERNATIONAL Occupation (for Individual) SUPERVISOR QA DEPT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2017
Transaction ID : SA11A.501649
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 699 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TARAFDER, ABU, Y., ,

Mailing Address **48 CLARKE STREET**

City BRENTWOOD	State NY	Zip Code 11717-2024
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LNK INTERNATIONAL	Occupation (for Individual) SUPERVISOR QA DEPT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
05 / 15 / 2017

Transaction ID : SA11A.505056

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TARBUTTON, BEN, , MR., III

Mailing Address **PO BOX 269**

City SANDERSVILLE	State GA	Zip Code 31082-0269
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SANDERSVILLE RAILROAD	Occupation (for Individual) TRANSPORTATION
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
06 / 16 / 2017

Transaction ID : SA11A.510631

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TAUBMAN, ROBERT, S., MR,

Mailing Address **200 E LONG LAKE RD STE 180**

City BLOOMFIELD HILLS	State MI	Zip Code 48304-2336
---------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE TAUBMAN COMPANY	Occupation (for Individual) PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
06 / 15 / 2017

Transaction ID : SA11A.510437

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	51035.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 700 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2681 W. HWY. 5
 City WHITESBURG State GA Zip Code 30185-3318
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2017
Transaction ID : SA11A.504110
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TAYLOR, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2681 W. HWY. 5
 City WHITESBURG State GA Zip Code 30185-3318
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2017
Transaction ID : SA11A.507545
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TAYLOR, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2681 W. HWY. 5
 City WHITESBURG State GA Zip Code 30185-3318
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.513318
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**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 701 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEDFORD, ALAN, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1814 SHADOW LANE
 City LITTLE ROCK State AR Zip Code 72207-2016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504752
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. TEDFORD, WILLIAM, L., MR., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5607 HAWTHORNE
 City LITTLE ROCK State AR Zip Code 72207-4307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504708
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. TELL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 ROYAL PALM WAY 3G
 City PALM BEACH State FL Zip Code 33480-4213
 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 ▼ 1500.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11A.500716
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 702 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. TELL, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 ROYAL PALM WAY
3G

City PALM BEACH State FL Zip Code 33480-4213

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 ▼
1500.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2017

Transaction ID : SA11A.503871

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. TELL, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 ROYAL PALM WAY
3G

City PALM BEACH State FL Zip Code 33480-4213

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 ▼
1500.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2017

Transaction ID : SA11A.508131

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. TEMPLE, G. ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 5 / 1644 US 3 NORTH

City TWIN MOUNTAIN State NH Zip Code 03595-0005

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 ▼
335.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2017

Transaction ID : SA11A.500673

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00

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

**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 703 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TEMPLE, G. ERNEST, , ,

Mailing Address **P.O. BOX 5 / 1644 US 3 NORTH**

City TWIN MOUNTAIN	State NH	Zip Code 03595-0005
------------------------------	--------------------	-------------------------------

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 ▼ **335.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2017

Transaction ID : SA11A.501527

Amount of Each Receipt this Period

15.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TEMPLE, G. ERNEST, , ,

Mailing Address **P.O. BOX 5 / 1644 US 3 NORTH**

City TWIN MOUNTAIN	State NH	Zip Code 03595-0005
------------------------------	--------------------	-------------------------------

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 ▼ **335.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2017

Transaction ID : SA11A.503553

Amount of Each Receipt this Period

40.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TEMPLE, G. ERNEST, , ,

Mailing Address **P.O. BOX 5 / 1644 US 3 NORTH**

City TWIN MOUNTAIN	State NH	Zip Code 03595-0005
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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 ▼ **335.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2017

Transaction ID : SA11A.507846

Amount of Each Receipt this Period

40.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**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 704 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEMPLE, G. ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 5 / 1644 US 3 NORTH
 City TWIN MOUNTAIN State NH Zip Code 03595-0005
 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 ▼ 335.00

Date of Receipt 06 / 11 / 2017
Transaction ID : SA11A.510020
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. TEMPLE, G. ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 5 / 1644 US 3 NORTH
 City TWIN MOUNTAIN State NH Zip Code 03595-0005
 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 ▼ 335.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512820
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

C. THOMA, CARL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 E WALTON PL UNIT 33A
 City CHICAGO State IL Zip Code 60611-1997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMA BRAVO Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11A.507930
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5480.00
TOTAL This Period (last page this line number only).....	

**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 705 OF 1054
	<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)
Team Ryan

A. THOMAS, FRANK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14601 BLACK BEAR RD
City LITTLE ROCK State AR Zip Code 72223-1993
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) STEPHENS Occupation (for Individual) ASSISTANT TO THE CHAIRMAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504712
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. THOMPSON, GREG, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2000 AMYS RIDGE CT
City BEAVERCREEK State OH Zip Code 45434-7196
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) GREATER DAXTON CONSTRUCTION Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.505691
Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. THOMPSON, MICHAEL, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 323 N. COLUMBUS ST.
City ALEXANDRIA State VA Zip Code 22314-2413
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) GOLDMAN SACHS Occupation (for Individual) MANAGING DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11A.501703
Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 8000.00
TOTAL This Period (last page this line number only)..... ▶

**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 706 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, TOMMY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 18657
 City WASHINGTON State DC Zip Code 20036-8657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMPSON FAMILY HOLDINGS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11A.512794
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

B. THOMPSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 MANDALAY
 City SAN MARCOS State TX Zip Code 78666-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2017
Transaction ID : SA11A.503291
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. THOMPSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 MANDALAY
 City SAN MARCOS State TX Zip Code 78666-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2017
Transaction ID : SA11A.506272
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**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 707 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 MANDALAY

City SAN MARCOS	State TX	Zip Code 78666-3631
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
06 / 22 / 2017
Transaction ID : SA11A.512263

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. THOMSEN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 WYALUSING DR

City MADISON	State WI	Zip Code 53718-3305
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHOEP'S ICE CREAM	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
06 / 12 / 2017
Transaction ID : SA11A.509456

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. THORNTON, PATRICK, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 624 N ARLINGTON HTS RD

City ARLINGTON HTS	State IL	Zip Code 60004-5662
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAT MOONEY INC	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
04 / 26 / 2017
Transaction ID : SA11A.503427

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**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 708 OF 1054
	<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)
Team Ryan

A. THORNTON, PATRICK, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 N ARLINGTON HTS RD
 City ARLINGTON HTS State IL Zip Code 60004-5662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAT MOONEY INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506866
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. THORNTON, PATRICK, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 N ARLINGTON HTS RD
 City ARLINGTON HTS State IL Zip Code 60004-5662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAT MOONEY INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512657
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TIGANI JR., JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 N LAKE WAY
 City PALM BEACH State FL Zip Code 33480-3323
 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 ▼ 300.00

Date of Receipt 04 / 19 / 2017
Transaction ID : SA11A.502710
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**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 709 OF 1054
	<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)
Team Ryan

A. TIGANI JR., JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 N LAKE WAY
 City PALM BEACH State FL Zip Code 33480-3323
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2017
Transaction ID : SA11A.505934
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. TIGANI JR., JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 N LAKE WAY
 City PALM BEACH State FL Zip Code 33480-3323
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2017
Transaction ID : SA11A.511699
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. TIGNER, WARREN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 MILLER ROAD
 City ROSHARON State TX Zip Code 77583-4533
 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 ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504820
 Amount of Each Receipt this Period
 60.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**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 710 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIGNER, WARREN, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2203 MILLER ROAD
City ROSHARON State TX Zip Code 77583-4533
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 ▼ 310.00

Date of Receipt 06 / 15 / 2017
Transaction ID : SA11A.510519
Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. TILLERY, BLAKE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 404 DURDEN ST
City VIDALIA State GA Zip Code 30474-4603
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SMITH & TILLERY Occupation (for Individual) ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508947
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. TIMM, LOIS, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 139 GROSSE PINES DRIVE
City ROCHESTER HILLS State MI Zip Code 48309-1829
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 ▼ 1000.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511822
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2150.00
TOTAL This Period (last page this line number only)..... ▶

**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 711 OF 1054
	<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)
Team Ryan

A. TIPSORD, MICHAEL, L.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 WINDSONG WAY

City BLOOMINGTON	State IL	Zip Code 61704-8350
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE FARM MUTUAL AUTO INSURANCE CO	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2017

Transaction ID : SA11A.500937

Amount of Each Receipt this Period
5400.00

Memo Item
CONTRIBUTION

B. TOLLETTE, HENRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 45TH ST

City SACRAMENTO	State CA	Zip Code 95819-3410
--------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2017

Transaction ID : SA11A.503073

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. TOLLETTE, HENRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 45TH ST

City SACRAMENTO	State CA	Zip Code 95819-3410
--------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2017

Transaction ID : SA11A.506508

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5600.00
TOTAL This Period (last page this line number only).....	

**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 712 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOLLETTE, HENRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 45TH ST

City SACRAMENTO	State CA	Zip Code 95819-3410
--------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2017

Transaction ID : SA11A.512712

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. TOTH, MIKLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 EAST 89TH STREET
15F

City NEW YORK	State NY	Zip Code 10128-1251
------------------	-------------	------------------------

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 ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2017

Transaction ID : SA11A.501050

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. TOTH, MIKLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 EAST 89TH STREET
15F

City NEW YORK	State NY	Zip Code 10128-1251
------------------	-------------	------------------------

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 ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2017

Transaction ID : SA11A.501219

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**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 713 OF 1054
<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)
Team Ryan

A. TOTH, MIKLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 EAST 89TH STREET
15F

City NEW YORK State NY Zip Code 10128-1251

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 ▼
650.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2017

Transaction ID : SA11A.504301

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. TOTH, MIKLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 EAST 89TH STREET
15F

City NEW YORK State NY Zip Code 10128-1251

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 ▼
650.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2017

Transaction ID : SA11A.508769

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. TRAN, DAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 566 CUTRUS AVE

City IMPERIAL BCH State CA Zip Code 91932-1112

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 ▼
300.00

Date of Receipt
MM / DD / YYYY
04 / 07 / 2017

Transaction ID : SA11A.501288

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**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 714 OF 1054
	<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)
Team Ryan

A. TRAN, DAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 566 CUTRUS AVE

City IMPERIAL BCH	State CA	Zip Code 91932-1112
----------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2017

Transaction ID : SA11A.502870

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. TRAN, DAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 566 CUTRUS AVE

City IMPERIAL BCH	State CA	Zip Code 91932-1112
----------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2017

Transaction ID : SA11A.505294

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. TRAN, DAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 566 CUTRUS AVE

City IMPERIAL BCH	State CA	Zip Code 91932-1112
----------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2017

Transaction ID : SA11A.506324

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 715 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRAN, DAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 566 CUTRUS AVE
 City IMPERIAL BCH State CA Zip Code 91932-1112
 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 ▼ 300.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.509354
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TRAN, DAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 566 CUTRUS AVE
 City IMPERIAL BCH State CA Zip Code 91932-1112
 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 ▼ 300.00

Date of Receipt 06 / 21 / 2017
Transaction ID : SA11A.512237
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TRISCARI, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3991 IBBETSON STREET
 City CORONA State CA Zip Code 92882-5003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCI Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.502012
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 716 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TRIVITT, ANNIE, F., MS.,

Mailing Address P.O. BOX 42

City STAURT State OK Zip Code 74570-0042

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 ▼
270.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2017

Transaction ID : SA11A.505153

Amount of Each Receipt this Period
70.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TRIVITT, ANNIE, F., MS.,

Mailing Address P.O. BOX 42

City STAURT State OK Zip Code 74570-0042

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 ▼
270.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2017

Transaction ID : SA11A.512528

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TROESH, DENNIS, A., ,

Mailing Address 1370 JET STREAM DR STE 100

City HENDERSON State NV Zip Code 89052-4234

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 ▼
50000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2017

Transaction ID : SA11A.504768

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50170.00

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

**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 717 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TROTH, ROBERT, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 GULF SHORE BOULEVARD N APT 30
 City NAPLES State FL Zip Code 34103-3912
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2017
Transaction ID : SA11A.512414
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. TUCKER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3746 SCARLET OAK
 City CORPUS CHRISTI State TX Zip Code 78418-9127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONLINE DIRECTIONAL Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2017
Transaction ID : SA11A.503765
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. TUCKER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3746 SCARLET OAK
 City CORPUS CHRISTI State TX Zip Code 78418-9127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONLINE DIRECTIONAL Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2017
Transaction ID : SA11A.507483
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**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 718 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUCKER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3746 SCARLET OAK
 City CORPUS CHRISTI State TX Zip Code 78418-9127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONLINE DIRECTIONAL Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2017
Transaction ID : SA11A.513186
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. TURNAGE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 ALFORD AVE
 City HOOVER State AL Zip Code 35226-1912
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503934
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TURNAGE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 ALFORD AVE
 City HOOVER State AL Zip Code 35226-1912
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507303
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 719 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TURNER, JEFFERY, B., MR.,

Mailing Address **PO BOX 246**

City **PINK HILL** State **NC** Zip Code **28572-0246**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **MURPHY FAMILY VENTURES** Occupation (for Individual) **COO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
06 / 26 / 2017
Transaction ID : SA11A.512297

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TURNER, THOMAS, , ,

Mailing Address **848 CENTRAL DR.**

City **ODESSA** State **TX** Zip Code **79761-4202**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **TURNER EYE CLINIC** Occupation (for Individual) **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **786.00**

Date of Receipt
04 / 30 / 2017
Transaction ID : SA11A.504016

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TURNER, THOMAS, , ,

Mailing Address **848 CENTRAL DR.**

City **ODESSA** State **TX** Zip Code **79761-4202**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **TURNER EYE CLINIC** Occupation (for Individual) **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **786.00**

Date of Receipt
05 / 30 / 2017
Transaction ID : SA11A.507267

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **2262.00**

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

**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 720 OF 1054
	<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)
Team Ryan

A. TURNER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 848 CENTRAL DR.

City ODESSA	State TX	Zip Code 79761-4202
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TURNER EYE CLINIC	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
786.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11A.513702

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

B. TUTTLE, ROBERT, , AMBASSADOR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9701 WILSHIRE BLVD STE 1100

City BEVERLY HILLS	State CA	Zip Code 90212-2011
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TUTTLE-CLICK AUTOMOTIVE GROUP	Occupation (for Individual) CO-MANAGING DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2017

Transaction ID : SA11A.502973

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

C. TWEED, AMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4315 N GLENVIEW

City RAPID CITY	State SD	Zip Code 57702-6823
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RCCSS	Occupation (for Individual) TEACHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2017

Transaction ID : SA11A.501491

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50381.00
TOTAL This Period (last page this line number only).....	

**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 721 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TWEED, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4315 N GLENVIEW
 City RAPID CITY State SD Zip Code 57702-6823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RCCSS Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : SA11A.505380
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. TWEED, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4315 N GLENVIEW
 City RAPID CITY State SD Zip Code 57702-6823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RCCSS Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2017
Transaction ID : SA11A.510054
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. UHL, ARTHUR, G., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 CLAIBORNE WAY
 City SAN ANTONIO State TX Zip Code 78209-5119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508943
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3200.00
TOTAL This Period (last page this line number only).....	

**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 722 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. UIHLEIN, MARGERY, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 W ESTATES DR.
 City MEQUON State WI Zip Code 53092-8553
 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 ▼ 1000.00

Date of Receipt **06 / 16 / 2017**
Transaction ID : SA11A.510628
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. ULRICH, TOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 898 AMBOY AVE.
 City EDISON State NJ Zip Code 08837-3268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **04 / 06 / 2017**
Transaction ID : SA11A.501197
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ULRICH, TOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 898 AMBOY AVE.
 City EDISON State NJ Zip Code 08837-3268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **05 / 06 / 2017**
Transaction ID : SA11A.505312
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 723 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ULRICH, TOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 898 AMBOY AVE.
 City EDISON State NJ Zip Code 08837-3268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 06 / 2017
Transaction ID : SA11A.509305
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. URSTADT, ELINOR, F., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 BEECHWOOD ROAD
 City BRONXVILLE State NY Zip Code 10708-3202
 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 ▼ 400.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11A.500576
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. URSTADT, ELINOR, F., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 BEECHWOOD ROAD
 City BRONXVILLE State NY Zip Code 10708-3202
 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 ▼ 400.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504236
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**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 724 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. URSTADT, ELINOR, F., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 BEECHWOOD ROAD

City BRONXVILLE	State NY	Zip Code 10708-3202
--------------------	-------------	------------------------

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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2017

Transaction ID : SA11A.508804

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. VALLAR, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1530 LONDON ROAD

City CHARLOTTESVILLE	State VA	Zip Code 22901-8880
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GUARD HILL ADVISORS	Occupation (for Individual) INVESTMENT ADVISOR
--	---

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
04	/	14	/	2017

Transaction ID : SA11A.501934

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

C. VALLAR, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1530 LONDON ROAD

City CHARLOTTESVILLE	State VA	Zip Code 22901-8880
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GUARD HILL ADVISORS	Occupation (for Individual) INVESTMENT ADVISOR
--	---

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
05	/	14	/	2017

Transaction ID : SA11A.505723

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**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 725 OF 1054
	<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)
Team Ryan

A. VALLAR, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1530 LONDON ROAD

City CHARLOTTESVILLE	State VA	Zip Code 22901-8880
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GUARD HILL ADVISORS	Occupation (for Individual) INVESTMENT ADVISOR
--	---

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
06	/	14	/	2017

Transaction ID : SA11A.510583

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

B. VAN FLEET, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 HARBOURTON WOODSVILLE RD

City PENNINGTON	State NJ	Zip Code 08534-3708
--------------------	-------------	------------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2017

Transaction ID : SA11A.507238

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. VAN FLEET, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 HARBOURTON WOODSVILLE RD

City PENNINGTON	State NJ	Zip Code 08534-3708
--------------------	-------------	------------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2017

Transaction ID : SA11A.508728

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**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 726 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN FLEET, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 HARBOURTON WOODSVILLE RD
 City PENNINGTON State NJ Zip Code 08534-3708
 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 ▼ 225.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513643
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VANDERSTEEG, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12112 FREDERICKSBURG BLVD
 City KNOXVILLE State TN Zip Code 37922-6651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COVENANT HEALTH Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510636
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. VASSILIOU, ARGYRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 ACME PALLET CO 45-10 COURT SQUA
 City LONG ISLAND CITY State NY Zip Code 11101-4339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACME PALLET CO Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11A.504807
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7600.00
TOTAL This Period (last page this line number only)..... ▶

**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 727 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAUGHN, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 NEWLANDS ST
 City CHEVY CHASE State MD Zip Code 20815-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VINSON & ELKINS LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11A.501747
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. VELDWYK, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5504 RAINIER AVENUE S
 City SEATTLE State WA Zip Code 98118-2441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512097
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. VINEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25723 MEADOWHOUSE COURT
 City CHANTILLY State VA Zip Code 20152-2588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BGR GOVERNMENT AFFAIRS Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 12 / 2017
Transaction ID : SA11A.501537
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3250.00
TOTAL This Period (last page this line number only).....▶	

**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 728 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VITALE, ANGELO, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15863 AUGUSTA CT

City NORTHVILLE	State MI	Zip Code 48168-8622
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QUICKEN LOANS	Occupation (for Individual) EVP & GENERAL COUNSEL
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.512754

Amount of Each Receipt this Period
1100.00

Memo Item
CONTRIBUTION

B. VOLLBRACHT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3033 E 1ST AVE, STE 600

City DENVER	State CO	Zip Code 80206-5620
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAND TITLE GUARANTEE COMPANY	Occupation (for Individual) ENTREPRENEUR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2017

Transaction ID : SA11A.503522

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. VOLLBRACHT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3033 E 1ST AVE, STE 600

City DENVER	State CO	Zip Code 80206-5620
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAND TITLE GUARANTEE COMPANY	Occupation (for Individual) ENTREPRENEUR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2017

Transaction ID : SA11A.507802

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11100.00
TOTAL This Period (last page this line number only).....▶	

**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 729 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOLLBRACHT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3033 E 1ST AVE, STE 600

City DENVER	State CO	Zip Code 80206-5620
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAND TITLE GUARANTEE COMPANY	Occupation (for Individual) ENTREPRENEUR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2017

Transaction ID : SA11A.512874

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

B. WAGNER, GEORGE, J., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6004 GLEN HILL ROAD

City LOUISVILLE	State KY	Zip Code 40222-6128
--------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2017

Transaction ID : SA11A.511439

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. WAGNER, JACK, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1524 AUSTIN LANE

City BELLINGHAM	State WA	Zip Code 98229-5221
--------------------	-------------	------------------------

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 ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2017

Transaction ID : SA11A.507106

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5350.00
TOTAL This Period (last page this line number only).....▶	

**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 730 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAKE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3067
 City NAPERVILLE State IL Zip Code 60566-7067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EBY-BROWN Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2017
Transaction ID : SA11A.501329
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. WALKER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 N 13TH ST
 City TEMPLE State TX Zip Code 76501-4265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LENGFLED LUMBER CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504782
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. WALKER, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30856 E HAYDEN LOOP
 City CATALDO State ID Zip Code 83810-9203
 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 ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2017
Transaction ID : SA11A.502921
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

**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 731 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALL, KATHALEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 667
 City HOUSTON State TX Zip Code 77001-0667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 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
 05 / 24 / 2017
Transaction ID : SA11A.506054
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. WALL, KATHALEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 667
 City HOUSTON State TX Zip Code 77001-0667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 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
 06 / 29 / 2017
Transaction ID : SA11A.512951
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. WALSTON, DOANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 DEEP CREEK DR.
 City CLAYTON State NC Zip Code 27520-8161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPEEDWAY Occupation (for Individual) TRUCK DRIVER
 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
 04 / 26 / 2017
Transaction ID : SA11A.503410
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10050.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 732 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALSTON, DOANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 DEEP CREEK DR.
 City CLAYTON State NC Zip Code 27520-8161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPEEDWAY Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11A.506858
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WALTERS, ROBERT, D., MR., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 S WASHINGTON AVE UNIT 1802
 City ROYAL OAK State MI Zip Code 48067-3865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUICKEN LOANS Occupation (for Individual) PRESIDENT & COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11A.512755
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 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 ▼ 300.00

Date of Receipt 04 / 30 / 2017
Transaction ID : SA11A.503954
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2800.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 733 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507299
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513689
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WARD, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 78
 City PENRYN State CA Zip Code 95663-0078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2017
Transaction ID : SA11A.504604
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 734 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. WARNER, GERALDINE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8880 OLD INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243-3726
 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 ▼ 25000.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504677
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. WARREN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16678 HIDDEN COVE DRIVE
 City JUPITER State FL Zip Code 33477-1305
 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 ▼ 300.00

Date of Receipt **04 / 17 / 2017**
Transaction ID : SA11A.502327
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WARREN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16678 HIDDEN COVE DRIVE
 City JUPITER State FL Zip Code 33477-1305
 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 ▼ 300.00

Date of Receipt **05 / 17 / 2017**
Transaction ID : SA11A.505826
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 TO BE CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ▶ 25100.00
TOTAL This Period (last page this line number only)..... ▶

**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 735 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARREN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16678 HIDDEN COVE DRIVE
 City JUPITER State FL Zip Code 33477-1305
 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 ▼ 300.00

Date of Receipt 06 / 17 / 2017
Transaction ID : SA11A.511785
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 TO BE CHARGED BACK

B. WARREN, NITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 E COOPER STREET
 City BROWNSVILLE State TN Zip Code 38012-3524
 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 ▼ 400.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11A.512497
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. WATKINS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18000 SARAH HILLLANE
 City LAKE OSWEGO State OR Zip Code 97035-6549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAVE FORM SYSTEMS, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 09 / 2017
Transaction ID : SA11A.501397
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**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 736 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAY, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 343 VALLEY CLUB CIR

City LITTLE ROCK	State AR	Zip Code 72212-2900
---------------------	-------------	------------------------

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 ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2017

Transaction ID : SA11A.504194

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. WAY, MERLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 473 LAKEIEW BLVD

City NEW BRAUNFELS	State TX	Zip Code 78130-5231
-----------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2017

Transaction ID : SA11A.500703

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WAY, MERLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 473 LAKEIEW BLVD

City NEW BRAUNFELS	State TX	Zip Code 78130-5231
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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 ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2017

Transaction ID : SA11A.503825

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 737 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
Team Ryan

A. WAY, MERLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 473 LAKEIEW BLVD
 City NEW BRAUNFELS State TX Zip Code 78130-5231
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11A.508090
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WEBER, INES, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 881 CHATTANOOGA AVE
 City PACIFIC PALISADES State CA Zip Code 90272-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2017
Transaction ID : SA11A.503107
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. WEBER, INES, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 881 CHATTANOOGA AVE
 City PACIFIC PALISADES State CA Zip Code 90272-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503442
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**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 738 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, INES, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 881 CHATTANOOGA AVE
 City PACIFIC PALISADES State CA Zip Code 90272-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2017
Transaction ID : SA11A.506396
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. WEBER, INES, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 881 CHATTANOOGA AVE
 City PACIFIC PALISADES State CA Zip Code 90272-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : SA11A.506877
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. WEBER, INES, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 881 CHATTANOOGA AVE
 City PACIFIC PALISADES State CA Zip Code 90272-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2017
Transaction ID : SA11A.512393
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**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 739 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, INES, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 881 CHATTANOOGA AVE
 City PACIFIC PALISADES State CA Zip Code 90272-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2017
Transaction ID : SA11A.512663
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. WEBSTER, ROBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 18TH STREET S
 City ARLINGTON State VA Zip Code 22202-2604
 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 ▼ 250.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505190
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WEBSTER, STEVEN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 DALLAS ST, STE 2300
 City HOUSTON State TX Zip Code 77002-4724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVISTA CAPITAL Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510630
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100270.00
TOTAL This Period (last page this line number only).....	

**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 740 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEILAND, RICHARD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2444 MADISON RD
 APT 1406
 City CINCINNATI State OH Zip Code 45208-1277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504496
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. WEISS, RODERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 236
 City RICHMOND State IN Zip Code 47375-0236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504697
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. WELCH, JASPER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 KIRBY DRIVE UNIT 4
 City HOUSTON State TX Zip Code 77019-6064
 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 ▼ 270.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11A.510728
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7700.00
TOTAL This Period (last page this line number only).....	

**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 741 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELTE, ROBERT, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 PORT ST., COTTAGE 324
 City EASTON State MD Zip Code 21601-8155
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2017
Transaction ID : SA11A.502540
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. WELTE, ROBERT, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 PORT ST., COTTAGE 324
 City EASTON State MD Zip Code 21601-8155
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2017
Transaction ID : SA11A.505875
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. WELTE, ROBERT, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 PORT ST., COTTAGE 324
 City EASTON State MD Zip Code 21601-8155
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2017
Transaction ID : SA11A.511737
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 742 OF 1054
	<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)
Team Ryan

A. WHEELER, WILLIAM, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 147 BRITE AVE

City SCARSDALE	State NY	Zip Code 10583-1426
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ATHENE HOLDINGS LTD	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2017

Transaction ID : SA11A.508249

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. WHITACRE, EDWARD, E., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 TERRELL RD

City SAN ANTONIO	State TX	Zip Code 78209-5917
---------------------	-------------	------------------------

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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : SA11A.504786

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. WHITE, BEVERLY, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9176 SYDNEY LANE

City BRENTWOOD	State TN	Zip Code 37027-8149
-------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2017

Transaction ID : SA11A.502380

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

**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 743 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, BEVERLY, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9176 SYDNEY LANE
 City BRENTWOOD State TN Zip Code 37027-8149
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.505584
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WHITE, BEVERLY, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9176 SYDNEY LANE
 City BRENTWOOD State TN Zip Code 37027-8149
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11A.511149
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WHITE, DOUGLAS, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3610 CAPTAINS WAY
 City KNOXVILLE State TN Zip Code 37922-9411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508940
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10100.00
TOTAL This Period (last page this line number only).....	

**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 744 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, MICHAEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 MANATEE INLET
 City INDIAN RIVER SHORE State FL Zip Code 32963-3731
 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 ▼ 25000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502946
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. WHITE, NORMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10341 LEOLANG AVENUE
 City SUNLAND State CA Zip Code 91040-3114
 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 ▼ 263.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505096
 Amount of Each Receipt this Period 53.00
 Memo Item CONTRIBUTION

C. WHITEHURST, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3004 UNIVERSITY AVE
 City COLUMBUS State GA Zip Code 31907-2106
 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 ▼ 600.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.502324
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25153.00
TOTAL This Period (last page this line number only).....▶	

**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 745 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITEHURST, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3004 UNIVERSITY AVE
 City COLUMBUS State GA Zip Code 31907-2106
 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 ▼ 600.00

Date of Receipt 05 / 17 / 2017
Transaction ID : SA11A.505816
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WHITEHURST, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3004 UNIVERSITY AVE
 City COLUMBUS State GA Zip Code 31907-2106
 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 ▼ 600.00

Date of Receipt 06 / 17 / 2017
Transaction ID : SA11A.511775
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WIEGAND, SAMUEL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6584 CHAMPETRE COURT
 City RENO State NV Zip Code 89511-5077
 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 ▼ 250.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11A.504500
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 746 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. WILCOX, KEVIN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 CENTER ST
 City LITTLE ROCK State AR Zip Code 72201-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHENS INC. Occupation (for Individual) INVESTMENT BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504688
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WILDRICK, CRAIG, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3941 S DEXTER STREET
 City CHERRY HILLS VILLA State CO Zip Code 80113-5147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JEPPESEN Occupation (for Individual) FINANCIAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500990
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WILEY, DOUGLAS, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 HUCKLEBERRY LANE
 City SAVANNAH State TN Zip Code 38372-7913
 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 ▼ 325.00

Date of Receipt 04 / 14 / 2017
Transaction ID : SA11A.501642
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1625.00
TOTAL This Period (last page this line number only).....▶	

**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 747 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506460
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILKE, JOHN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1035 B CALLE SASTRE
 City SANTA BARBARA State CA Zip Code 93105-5483
 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 ▼ 750.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11A.505198
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. WILKERSON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 RESERVE DRIVE
 City PIEDMONT State SC Zip Code 29673-6733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEARING HEALTHCARE CENTER Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503752
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

**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 748 OF 1054
	<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)
Team Ryan

A. WILKERSON, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 145 RESERVE DRIVE

City PIEDMONT	State SC	Zip Code 29673-6733
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEARING HEALTHCARE CENTER	Occupation (for Individual) OWNER
--	--------------------------------------

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
05		28		2017

Transaction ID : SA11A.507474

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WILKERSON, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 145 RESERVE DRIVE

City PIEDMONT	State SC	Zip Code 29673-6733
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEARING HEALTHCARE CENTER	Occupation (for Individual) OWNER
--	--------------------------------------

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
06		28		2017

Transaction ID : SA11A.513223

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WILKINSON, PATSY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 281 BROADWAY AVENUE

City OAK RIDGE	State TN	Zip Code 37830-6507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COVENANT HEALTH	Occupation (for Individual) PHARMACIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2017

Transaction ID : SA11A.504180

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 749 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILKINSON, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 281 BROADWAY AVENUE
 City OAK RIDGE State TN Zip Code 37830-6507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COVENANT HEALTH Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11A.508106
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILLCOXON, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 FALCON HILLS DR.
 City HIGHLANDS RANCH State CO Zip Code 80126-2901
 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 ▼ 250.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.503207
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WILLIAMS, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 PELICAN POINT DR.
 City NEWPORT COAST State CA Zip Code 92657-2006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CWSWG INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11A.501107
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**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 750 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 PELICAN POINT DR.
 City NEWPORT COAST State CA Zip Code 92657-2006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CWSWG INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11A.504466
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. WILLIAMS, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 PELICAN POINT DR.
 City NEWPORT COAST State CA Zip Code 92657-2006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CWSWG INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11A.508748
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. WILLIAMS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 HALLUM ST
 City CLOVIS State NM Zip Code 88101-8685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS INSURANCE LLC Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 14 / 2017
Transaction ID : SA11A.501921
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 751 OF 1054
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 HALLUM ST
 City CLOVIS State NM Zip Code 88101-8685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS INSURANCE LLC Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 14 / 2017
Transaction ID : SA11A.505735
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILLIAMS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 HALLUM ST
 City CLOVIS State NM Zip Code 88101-8685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS INSURANCE LLC Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 14 / 2017
Transaction ID : SA11A.510605
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILLIAMS, DAVID, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8515 BLOME RD
 City CINCINNATI State OH Zip Code 45243-1003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHEMED CORPORATION Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504495
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

**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 752 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, EMMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address I2601 WEST 82ND STREET
 City INGLEWOOD State CA Zip Code 90305-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : SA11A.500582
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WILLIAMS, EMMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address I2601 WEST 82ND STREET
 City INGLEWOOD State CA Zip Code 90305-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2017
Transaction ID : SA11A.500584
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WILLIAMS, EMMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address I2601 WEST 82ND STREET
 City INGLEWOOD State CA Zip Code 90305-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2017
Transaction ID : SA11A.504226
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**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 753 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, EMMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address I2601 WEST 82ND STREET
 City INGLEWOOD State CA Zip Code 90305-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504242
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILLIAMS, EVELYN, N., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 BARNES ROAD
 City SAINT LOUIS State MO Zip Code 63124-1639
 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 ▼ 2500.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503315
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1949 POPULAR STREET
 City LELAND State NC Zip Code 28451-8181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALEX Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 305.00

Date of Receipt 04 / 17 / 2017
Transaction ID : SA11A.502372
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2530.00
TOTAL This Period (last page this line number only).....	

**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 754 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1949 POPULAR STREET

City LELAND	State NC	Zip Code 28451-8181
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALEX	Occupation (for Individual) MGR
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2017

Transaction ID : SA11A.504099

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WILLIAMS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1949 POPULAR STREET

City LELAND	State NC	Zip Code 28451-8181
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALEX	Occupation (for Individual) MGR
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2017

Transaction ID : SA11A.507530

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WILLIAMS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1949 POPULAR STREET

City LELAND	State NC	Zip Code 28451-8181
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALEX	Occupation (for Individual) MGR
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11A.513309

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 755 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. WILLIAMS, TIMOTHY, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2028 CHEROKEE BLVD
 City KNOXVILLE State TN Zip Code 37919-8339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 21ST MORTGAGE CORP Occupation (for Individual) CHIEF EXECUTIVE OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **06 / 02 / 2017**
Transaction ID : SA11A.507924
 Amount of Each Receipt this Period 25000.00
 Memo Item
 CONTRIBUTION

B. WILLIAMS, WENDELL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1121 WHITEROCK DR
 City TEMPLE State TX Zip Code 70502-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTRAL NATIONAL BANK- TEMPLE Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **05 / 16 / 2017**
Transaction ID : SA11A.504779
 Amount of Each Receipt this Period 2500.00
 Memo Item
 CONTRIBUTION

C. WILSON, GARY, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31528 VICTORIA POINT ROAD
 City MALIBU State CA Zip Code 90265-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **05 / 03 / 2017**
Transaction ID : SA11A.504163
 Amount of Each Receipt this Period 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	52500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 756 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. WILSON, JOLENE, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2115 BEECHWOOD ST

City LITTLE ROCK	State AR	Zip Code 72207-2021
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11A.504335

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. WILSON, LEONARD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4601 BROOKSIDE DRIVE

City ALEXANDRIA	State VA	Zip Code 22312-1408
--------------------	-------------	------------------------

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2017

Transaction ID : SA11A.511264

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. WILSON, WELCOME, W., , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5858 WESTHEIMER SUITE 800

City HOUSTON	State TX	Zip Code 77057-5777
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GSL WELCOME GROUP	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2017

Transaction ID : SA11A.500877

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3900.00
TOTAL This Period (last page this line number only).....▶	

**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 757 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINEGARD, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30000 KIRK WOOD
 City BURLINGTON State IA Zip Code 52601-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINEGARD COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 03 / 2017
Transaction ID : SA11A.500572
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. WINEGARD, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30000 KIRK WOOD
 City BURLINGTON State IA Zip Code 52601-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINEGARD COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 03 / 2017
Transaction ID : SA11A.504235
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. WINEGARD, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30000 KIRK WOOD
 City BURLINGTON State IA Zip Code 52601-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINEGARD COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 03 / 2017
Transaction ID : SA11A.508805
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 758 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINN, GREGORY, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6677 E INDIAN BEND RD
 City PARADISE VALLEY State AZ Zip Code 85253-4318
 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 ▼ 25000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11A.502963
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. WIRT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST G35
 City MIAMI State FL Zip Code 33015-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 19 / 2017
Transaction ID : SA11A.502719
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WIRT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST G35
 City MIAMI State FL Zip Code 33015-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505940
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25200.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 759 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. WIRT, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6175 NW 167 ST G35
City MIAMI State FL Zip Code 33015-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENT
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511700
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WISEMAN, DENISE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9810 STATE HEY 220
City CASPER State WY Zip Code 82604-
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 ▼ 600.00

Date of Receipt 04 / 21 / 2017
Transaction ID : SA11A.502889
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WISEMAN, DENISE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9810 STATE HEY 220
City CASPER State WY Zip Code 82604-
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 ▼ 600.00

Date of Receipt 05 / 21 / 2017
Transaction ID : SA11A.506332
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**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 760 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WISEMAN, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9810 STATE HEY 220
 City CASPER State WY Zip Code 82604-
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : SA11A.512245
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WOLASKY, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7200 RUTHERFORD RD
 City BALTIMORE State MD Zip Code 21244-2717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHSOURCE DISTRIBUTORS LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503365
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

C. WOLF, LAWRENCE, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 STORY STREET
 City NIPOMO State CA Zip Code 93444-9180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 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
 04 / 14 / 2017
Transaction ID : SA11A.501932
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**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 761 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. WOLF, LAWRENCE, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 STORY STREET
 City NIPOMO State CA Zip Code 93444-9180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 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
 05 / 14 / 2017
Transaction ID : SA11A.505734
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WOLF, LAWRENCE, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 STORY STREET
 City NIPOMO State CA Zip Code 93444-9180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 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
 06 / 14 / 2017
Transaction ID : SA11A.510612
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WONG, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BIG TRAIL
 City MISSOURI CITY State TX Zip Code 77459-6828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 TOLUNAY-WONG ENGINEERS ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2017
Transaction ID : SA11A.512182
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**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 762 OF 1054
	<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)
Team Ryan

A. WOOD, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10245 HASTINGS PLACE

City HARRISBURG	State NC	Zip Code 28075-6621
--------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2017

Transaction ID : SA11A.502877

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WOOD, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10245 HASTINGS PLACE

City HARRISBURG	State NC	Zip Code 28075-6621
--------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2017

Transaction ID : SA11A.506327

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

TO BE CHARGED BACK

C. WOOD, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10245 HASTINGS PLACE

City HARRISBURG	State NC	Zip Code 28075-6621
--------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2017

Transaction ID : SA11A.512244

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

TO BE CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**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 763 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4597
 City ODESSA State TX Zip Code 79760-4597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : SA11A.504760
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

B. WOOD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5905 W MEADOWPARK LANE
 City CRYSTAL RIVER State FL Zip Code 34429-2701
 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 ▼ 354.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.503931
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

C. WOOD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5905 W MEADOWPARK LANE
 City CRYSTAL RIVER State FL Zip Code 34429-2701
 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 ▼ 354.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507310
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10118.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 764 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5905 W MEADOWPARK LANE
 City CRYSTAL RIVER State FL Zip Code 34429-2701
 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 ▼ 354.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513672
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 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 ▼ 1200.00

Date of Receipt 04 / 15 / 2017
Transaction ID : SA11A.502452
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 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 ▼ 1200.00

Date of Receipt 04 / 19 / 2017
Transaction ID : SA11A.502733
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 259.00
TOTAL This Period (last page this line number only)..... ▶

**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 765 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 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 ▼ 1200.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505704
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 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 ▼ 1200.00

Date of Receipt 05 / 19 / 2017
Transaction ID : SA11A.505945
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 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 ▼ 1200.00

Date of Receipt 06 / 15 / 2017
Transaction ID : SA11A.510813
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 766 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2017
Transaction ID : SA11A.511709
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WOODARD, TURNER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 N CAPITOL AVENUE, SUITE C200
 City INDIANAPOLIS State IN Zip Code 46204-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2017
Transaction ID : SA11A.500895
 Amount of Each Receipt this Period
 120.00
 Memo Item
 CONTRIBUTION

C. WOOLSEY, RICK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 VENTURE ST. 100
 City SAN MARCOS State CA Zip Code 92078-4399
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD & RICHARD CONSTRUCTION Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2017
Transaction ID : SA11A.502861
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

**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 767 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. WOOLSEY, RICK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 VENTURE ST.
 100
 City SAN MARCOS State CA Zip Code 92078-4399
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD & RICHARD CONSTRUCTION Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2017
Transaction ID : SA11A.506315
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. WOOLSEY, RICK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 VENTURE ST.
 100
 City SAN MARCOS State CA Zip Code 92078-4399
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD & RICHARD CONSTRUCTION Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2017
Transaction ID : SA11A.512228
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL HYDRAULICS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 925.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2017
Transaction ID : SA11A.501501
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 768 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL HYDRAULICS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt **04 / 18 / 2017**
Transaction ID : SA11A.502522
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL HYDRAULICS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : SA11A.503049
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL HYDRAULICS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.505408
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**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 769 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL HYDRAULICS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 05 / 27 / 2017
Transaction ID : SA11A.507565
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL HYDRAULICS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11A.508089
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL HYDRAULICS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 06 / 06 / 2017
Transaction ID : SA11A.509286
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**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 770 OF 1054
	<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)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL HYDRAULICS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 06 / 13 / 2017
Transaction ID : SA11A.510226
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL HYDRAULICS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511914
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL HYDRAULICS, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 06 / 28 / 2017
Transaction ID : SA11A.513173
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**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 771 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Team Ryan

A. WRIGHT, EDWIN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2102 N L STREET
 City MIDLAND State TX Zip Code 79705-8635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2017
Transaction ID : SA11A.508951
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 RANDOM ROAD
 City ENGLEWOOD State CO Zip Code 80113-6105
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2017
Transaction ID : SA11A.501450
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 WINDSOR PARK DRIVE
 City DAYTON State OH Zip Code 45459-4131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON WRIGHT REALTY LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : SA11A.504019
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5130.00
TOTAL This Period (last page this line number only).....▶	

**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 772 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 WINDSOR PARK DRIVE
 City DAYTON State OH Zip Code 45459-4131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON WRIGHT REALTY LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : SA11A.507250
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, GAYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 WINDSOR PARK DRIVE
 City DAYTON State OH Zip Code 45459-4131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON WRIGHT REALTY LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11A.513589
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2017
Transaction ID : SA11A.502321
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**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 773 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2017
Transaction ID : SA11A.502450
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2017
Transaction ID : SA11A.503578
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2017
Transaction ID : SA11A.505701
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**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 774 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 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 ▼ 205.00

Date of Receipt
 06 / 15 / 2017
Transaction ID : SA11A.510811
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 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 ▼ 205.00

Date of Receipt
 06 / 20 / 2017
Transaction ID : SA11A.511876
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WULFE, EDMOND, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 POST OAK RD STE 400
 City HOUSTON State TX Zip Code 77056-3962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WULFE AND CO. Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 04 / 14 / 2017
Transaction ID : SA11A.501631
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**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 775 OF 1054
	<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)
Team Ryan

A. WULFF, ROBERT, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 219 SHAWMUT AVENUE
APT 2

City BOSTON State MA Zip Code 02118-2148

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 ▼
500.00

Date of Receipt
04 / 14 / 2017
Transaction ID : SA11A.501630

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. WYLER, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 MILFORD PARKWAY

City MILFORD State OH Zip Code 45150-1298

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JEFF WYLER AUTOMOTIVE FAMILY Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
05 / 08 / 2017
Transaction ID : SA11A.504487

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

C. WYSOCKI, MICHAEL, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3668 NORCROSS LN

City DALLAS State TX Zip Code 75229-5125

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) O'NEIL WYSOCKI PC Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9000.00

Date of Receipt
06 / 07 / 2017
Transaction ID : SA11A.509046

Amount of Each Receipt this Period
9000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	34500.00
TOTAL This Period (last page this line number only).....	

**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 776 OF 1054
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YATES, STACY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2804 STONEGATE DR.

City TEXARKANA	State TX	Zip Code 75503-5414
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) E-Z MART	Occupation (for Individual) CFO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : SA11A.504801

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. YODER, CARLIN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9547 TIMBERLINE DR

City INDIANAPOLIS	State IN	Zip Code 46256-4723
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE CORYDON GROUP	Occupation (for Individual) GOVERNMENT AFFAIRS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11A.504492

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. YOUNG, THOMAS, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8967 BLOOMFIELD BLVD

City SARASOTA	State FL	Zip Code 34238-4452
------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : SA11A.507196

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6100.00
TOTAL This Period (last page this line number only).....▶	

**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 777 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 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 ▼ 300.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA11A.511638
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 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 ▼ 300.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.513513
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BISHOP KELLY HIGH Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 28 / 2017
Transaction ID : SA11A.503741
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 778 OF 1054
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BISHOP KELLY HIGH Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11A.506428
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BISHOP KELLY HIGH Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 28 / 2017
Transaction ID : SA11A.507475
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BISHOP KELLY HIGH Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511894
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**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 779 OF 1054
	<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)
Team Ryan

A. YSURSA, GENEVIEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2846 S. TRAILWOOD WAY

City BOISE	State ID	Zip Code 83716-5742
---------------	----------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BISHOP KELLY HIGH	Occupation (for Individual) TEACHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2017

Transaction ID : SA11A.512270

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. YSURSA, GENEVIEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2846 S. TRAILWOOD WAY

City BOISE	State ID	Zip Code 83716-5742
---------------	----------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BISHOP KELLY HIGH	Occupation (for Individual) TEACHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2017

Transaction ID : SA11A.513227

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. YUEN, STEPHEN, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6200 RANCHESTER DRIVE,A PT 231

City HOUSTON	State TX	Zip Code 77036-
-----------------	----------	--------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2017

Transaction ID : SA11A.501014

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**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 780 OF 1054
	<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)
Team Ryan

A. YUEN, STEPHEN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6200 RANCHESTER DRIVE,A PT 231
 City HOUSTON State TX Zip Code 77036-
 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 ▼ 300.00

Date of Receipt 05 / 15 / 2017
Transaction ID : SA11A.505177
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. YUEN, STEPHEN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6200 RANCHESTER DRIVE,A PT 231
 City HOUSTON State TX Zip Code 77036-
 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 ▼ 300.00

Date of Receipt 06 / 20 / 2017
Transaction ID : SA11A.511401
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ZACHRY, JOHN, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 240130
 City SAN ANTONIO State TX Zip Code 78224-0130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508965
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2900.00
TOTAL This Period (last page this line number only)..... ▶

**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 781 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZARETZKA, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 STARLIGHT LN
 City ARROYO GRANDE State CA Zip Code 93420-4157
 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 ▼ 300.00

Date of Receipt **04 / 12 / 2017**
Transaction ID : SA11A.501604
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ZARETZKA, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 STARLIGHT LN
 City ARROYO GRANDE State CA Zip Code 93420-4157
 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 ▼ 300.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.505412
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ZARETZKA, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 STARLIGHT LN
 City ARROYO GRANDE State CA Zip Code 93420-4157
 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 ▼ 300.00

Date of Receipt **06 / 12 / 2017**
Transaction ID : SA11A.510000
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 782 OF 1054
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZEITLIN, HAROLD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 455 E 57TH STREET, APT 14B
 City NEW YORK State NY Zip Code 10022-3171
 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 ▼ 250.00

Date of Receipt 05 / 11 / 2017
Transaction ID : SA11A.505006
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ZELL, SAMUEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 N RIVERSIDE PLAZA SUITE 600
 City CHICAGO State IL Zip Code 60606-2627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EQUITY GROUP INVESTMENTS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11A.500936
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. ZHOU, PETERSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12926 NE 197TH PLACE
 City WOODINVILLE State WA Zip Code 98072-8694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) O-MASTERS CORP Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 26 / 2017
Transaction ID : SA11A.503294
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100350.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 783 OF 1054
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Team Ryan

A. ZIZZA, SALVATORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 GRACIE SQUARE

City NEW YORK	State NY	Zip Code 10028-8001
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ZIZZA & ASSOCIATES	Occupation (for Individual) INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2017

Transaction ID : SA11A.511814

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. ZWECK-BRONNER, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 BISHOP GADSDEN WAY
C20

City CHARLESTON	State SC	Zip Code 29412-3506
--------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : SA11A.508217

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. ACCESS THE USA LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 673 WOODLAND SQ LP SE STE 320

City LACEY	State WA	Zip Code 98503-1066
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11A.500828

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

REFUNDED \$25,000.00 ON 05/01/2017

SUBTOTAL of Receipts This Page (optional).....	25750.00
TOTAL This Period (last page this line number only).....	

**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 784 OF 1054
	<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)
Team Ryan

A. AUTOMOTIVE COLOR AND SUPPLY CORP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1902 S CALHOUN STREET

City FORT WAYNE State IN Zip Code 46802-5260

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
04 / 19 / 2017
Transaction ID : SA11A.502679

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

REFUNDED \$2,000.00 ON 04/24/2017

B. B&B WEDDING ENTERPRISES
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 969 3RD AVE #4

City NEW YORK State NY Zip Code 10022-2188

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 12 / 2017
Transaction ID : SA11A.504621

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;
SEE ATTRIBUTION BELOW

C. TRIMARCO, MICHAEL, , MR. ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 969 3RD AVE #4

City NEW YORK State NY Zip Code 10022-2188

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
B&B WEDDING ENTERPRISES OWNER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 12 / 2017
Transaction ID : SA11A.504623

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

**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 785 OF 1054
	<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)
Team Ryan

A. BREWSTER/JORY ASSOCIATES, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 499 S CAPITOL STREET SW
 City WASHINGTON State DC Zip Code 20003-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506047
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION
 VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;
 SEE ATTRIBUTION BELOW

B. VICTORY, JACK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4012 ETHAN THOMAS DR
 City CLINTON State MD Zip Code 20735-4420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BREWSTER/JORY ASSOCIATES CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 24 / 2017
Transaction ID : SA11A.506050
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. CASTLE HOOK PARTNERS LP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 W 55TH ST FL 26
 City NEW YORK State NY Zip Code 10019-7665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.504450
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION
 VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;
 SEE ATTRIBUTION BELOW

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

**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 786 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARNEY, JAKE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 E 65TH ST APT 4
 City NEW YORK State NY Zip Code 10065-7037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASTLE HOOK PARTNERS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : SA11A.505428
 Amount of Each Receipt this Period
 2500.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. DONFELD, JOSHUA, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 E 22ND ST APT 9ABC
 City NEW YORK State NY Zip Code 10010-5404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASTLE HOOK PARTNERS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : SA11A.505427
 Amount of Each Receipt this Period
 10000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. LENTZ, MATT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 455 E 57TH ST APT 6A
 City NEW YORK State NY Zip Code 10022-3171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASTLE HOOK PARTNERS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : SA11A.505429
 Amount of Each Receipt this Period
 2500.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**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 787 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 PARK AVE APT 11B
 City NEW YORK State NY Zip Code 10075-0385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASTLE HOOK PARTNERS Occupation (for Individual) CO-FOUNDER, CIO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 10000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11A.505426
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. CORNELL CAPITAL LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 499 PARK AVE 21ST FL
 City NEW YORK State NY Zip Code 10022-1240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 50000.00

Date of Receipt 05 / 23 / 2017
Transaction ID : SA11A.506029
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION
 VERIFIED AS FEDERALLY PERMISSIBLE FUNDS; SEE ATTRIBUTION BELOW

C. CORNELL, HENRY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 E 80TH ST
 City NEW YORK State NY Zip Code 10075-0306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNELL CAPITAL LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 50000.00

Date of Receipt 05 / 23 / 2017
Transaction ID : SA11A.506066
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50000.00
TOTAL This Period (last page this line number only).....	

**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 788 OF 1054
	<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)
Team Ryan

A. DFX LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3200 E CAMELBACK RD STE 295

City PHOENIX	State AZ	Zip Code 85018-2343
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2017

Transaction ID : SA11A.507895

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;
SEE ATTRIBUTION BELOW

B. NAJAFI, FRANCIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3200 E CAMELBACK RD #295

City PHOENIX	State AZ	Zip Code 85018-2343
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PIVOTAL GROUP	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2017

Transaction ID : SA11A.508894

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. FARRAGUT LAND PARTNERS, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 10226

City KNOXVILLE	State TN	Zip Code 37939-0226
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2017

Transaction ID : SA11A.510569

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

REFUNDED \$2,500.00 ON 07/17/2017

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 789 OF 1054
<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)
Team Ryan

A. FASKEN MANAGEMENT LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6101 HOLIDAY HILL RD

City MIDLAND	State TX	Zip Code 79707-1631
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : SA11A.504790

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

REFUNDED \$5,000.00 ON 06/15/2017

B. HIGH GRADE BEVERAGE BEER DISTRIBUTORS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 7092

City NORTH BRUNSWICK	State NJ	Zip Code 08902-7092
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2017

Transaction ID : SA11A.512041

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

REFUNDED \$500.00 ON 07/17/2017

C. KIRSTEN FEDEWA & ASSOCIATES
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1629A HUNTING CREEK DR

City ALEXANDRIA	State VA	Zip Code 22314-6217
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2017

Transaction ID : SA11A.502979

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;
SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....	6500.00
TOTAL This Period (last page this line number only).....	

**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 790 OF 1054
	<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)
Team Ryan

A. FEDEWA, KIRSTEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1629A HUNTING CREEK DR
 City ALEXANDRIA State VA Zip Code 22314-6217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRSTEN FEDEWA & ASSOCIATES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 25 / 2017**
Transaction ID : SA11A.506123
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MERCEDES-BENZ OF FORT WAYNE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7227 W JEFFERSON BLVD
 City FT. WAYNE State IN Zip Code 46804-6279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504619
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION
 REFUNDED \$10,000.00 ON 06/15/2017

C. RESOURCE MANAGEMENT SERVICE, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 380757
 City BIRMINGHAM State AL Zip Code 35238-0757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3700.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504641
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION
 VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;
 SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....▶	12700.00
TOTAL This Period (last page this line number only).....▶	

**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 791 OF 1054
	<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)
Team Ryan

A. BEACHER, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 52 SOUTHWIND RD

City NATCHEZ	State MS	Zip Code 39120-8771
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) LA REGION MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504732

Amount of Each Receipt this Period
36.94

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. BLAIR, CRAIG, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9524 CRETE CIRCLE

City TUSCALOOSA	State AL	Zip Code 35406-1092
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) PRESIDENT AND CEO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
537.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504724

Amount of Each Receipt this Period
392.01

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. BLOYD, STEPHANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 EARL RD

City PANAMA CITY BEACH	State FL	Zip Code 32461-7325
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) US LAND SALES MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504748

Amount of Each Receipt this Period
18.47

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**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 792 OF 1054
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BORDERS, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1221 TWIN OAKS TRAIL

City WATKINSVILLE	State GA	Zip Code 30677-2206
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) INVENTORY GROWTH AND YIELD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
41.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504719

Amount of Each Receipt this Period
30.05

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. BOWLING, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65 WILDER WAY

City MILLBROOK	State AL	Zip Code 36054-1800
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) AL REGION MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
49.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504729

Amount of Each Receipt this Period
36.34

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. BULLOCK, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1351 BOGUE CHITTO RD SE

City BOGUE CHITTO	State MS	Zip Code 39629-9779
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) SENIOR VP
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
62.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504734

Amount of Each Receipt this Period
45.62

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**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 793 OF 1054
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COFFEE, LOUIS, MITCHELL, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 HERMOSA DR.

City HOMEWOOD	State AL	Zip Code 35209-2076
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) GLOBAL ACQUISITION MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
244.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504739

Amount of Each Receipt this Period
178.21

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. CORNISH, CHARLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1302 LEGACY DR.

City BIRMINGHAM	State AL	Zip Code 35242-6068
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) RESOURCE PLANNING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504720

Amount of Each Receipt this Period
165.78

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. CRAWFORD, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3644 ROBIN CIRCLE

City BIRMINGHAM	State AL	Zip Code 35242-3322
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) INTERNATIONAL PORTFOLIO MANAC
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
17.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504725

Amount of Each Receipt this Period
12.77

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**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 794 OF 1054
	<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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CRUMPTON, GLEN, , ,			Date of Receipt MM / DD / YYYY 05 / 15 / 2017 Transaction ID : SA11A.504733
Mailing Address 220 ANNA CREEK DR.			Amount of Each Receipt this Period 69.59
City HELENA	State AL	Zip Code 35080-5013	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION PARTNERSHIP ATTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC		Occupation (for Individual) IT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 95.36		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DOSTER, TONY, , ,			Date of Receipt MM / DD / YYYY 05 / 12 / 2017 Transaction ID : SA11A.504743
Mailing Address 126 ALBERMARIE RD			Amount of Each Receipt this Period 41.32
City WILMINGTON	State NC	Zip Code 28405-	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION PARTNERSHIP ATTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC		Occupation (for Individual) NC REGION MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 56.62		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DUBOSE, DENNIS, , ,			Date of Receipt MM / DD / YYYY 05 / 12 / 2017 Transaction ID : SA11A.504727
Mailing Address 7223 N HIGHFIELD LANE			Amount of Each Receipt this Period 159.71
City BIRMINGHAM	State AL	Zip Code 35242-7244	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION PARTNERSHIP ATTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC		Occupation (for Individual) CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 218.86		

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**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 795 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ECKFORD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2655 ILIFF ST
 City BOULDER State CO Zip Code 80305-7017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) FOREST PLANNING MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 25.74

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504736
 Amount of Each Receipt this Period 18.78
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. EZEKIEL, MATT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 LANCASTER GATE DR.
 City PACE State FL Zip Code 32571-7397
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) FL REGION MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 25.74

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504746
 Amount of Each Receipt this Period 18.78
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. FERGUSON, JOEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 GREENBRIAR AVE
 City PAWLEYS ISLAND State SC Zip Code 29585-6356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) SC REGION MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 56.62

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504735
 Amount of Each Receipt this Period 41.32
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**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 796 OF 1054
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLASSCO, PHILLIP, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1031 BLUE HERON POINT
 City BIRMINGHAM State AL Zip Code 35242-6852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) FOREST SYSTEMS MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 288.82

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504737
 Amount of Each Receipt this Period 210.76
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. GREER, MARY, KAY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 EMERALD CIR
 City BIRMINGHAM State AL Zip Code 35242-3482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) CLIENT RELATIONS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 218.48

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504740
 Amount of Each Receipt this Period 159.43
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. HAMILTON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 ELKINS LAKE
 City HUNTSVILLE State TX Zip Code 77340-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) TX REGION MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 25.74

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504745
 Amount of Each Receipt this Period 18.78
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**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 797 OF 1054
	<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)
Team Ryan

A. HANCOCK, THOMAS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 ESPLANADE DR.
 City BRANDON State MS Zip Code 39047-8783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) HARVEST MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 141.78

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504741
 Amount of Each Receipt this Period 103.46
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. HANSEN, KARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 701
 City FORDYCE State AR Zip Code 71742-0701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) AR REGION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25.74

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504747
 Amount of Each Receipt this Period 18.78
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. HARRELL, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5244 BIRDSONG RD
 City BIRMINGHAM State AL Zip Code 35242-3301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20.60

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504722
 Amount of Each Receipt this Period 15.03
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 798 OF 1054
(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)
Team Ryan

A. HINSON, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3804 MONTCLAIR RD

City BIRMINGHAM	State AL	Zip Code 35213-2866
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) EXECUTIVE VP
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
69.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504718

Amount of Each Receipt this Period
50.51

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. KIMBERLY, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 212 WINDROSE DR.

City MADISON	State MS	Zip Code 39110-8005
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) WESTERN REGION LAND SALE MAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
31.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504728

Amount of Each Receipt this Period
22.75

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. LAMBERT, PAUL, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2746 GREENRIDGE WAY

City JAY	State FL	Zip Code 32565-4822
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) HARVEST MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
132.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504742

Amount of Each Receipt this Period
96.32

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**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 799 OF 1054
	<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)
Team Ryan

A. LOCKHART, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4304 LANE PARK CT
 City BIRMINGHAM State AL Zip Code 35223-2393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERVICES Occupation (for Individual) FOREST PLANNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 12.87

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504750
 Amount of Each Receipt this Period 9.39
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. NICHOLSON, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4723 SHADY WATERS LANE
 City BIRMINGHAM State AL Zip Code 35243-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) INVESTMENT ACCOUNTING
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 51.47

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504721
 Amount of Each Receipt this Period 37.56
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. NORMAN, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5006 LAKE SHORE DR.
 City PELL CITY State AL Zip Code 35128-7012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) SENIOR PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 51.47

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11A.504726
 Amount of Each Receipt this Period 37.56
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**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 800 OF 1054
	<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)
Team Ryan

A. O'CONNOR, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STRATFORD RD

City BIRMINGHAM	State AL	Zip Code 35242-3121
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) FORESTRY OPERATIONS MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504731

Amount of Each Receipt this Period
5.63

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. PEELER, R., J., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 242 ODUM CREST LANE

City HOOVER	State AL	Zip Code 35226-1089
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504738

Amount of Each Receipt this Period
181.73

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. SMITH, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4124 CHURCHILL DR.

City BIRMINGHAM	State AL	Zip Code 35213-3947
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC	Occupation (for Individual) INTERNATIONAL PORTFOLIO MANAC
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11A.504749

Amount of Each Receipt this Period
6.76

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**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 801 OF 1054
	<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)
Team Ryan

A. SWEETEN, EDWIN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 SURREYWOOD LANE
 City BLYTHEWOOD State SC Zip Code 29016-8454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 462.10

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504730
 Amount of Each Receipt this Period 337.21
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. TOOMBS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 FAIRHAVENS DR.
 City BRANDON State MS Zip Code 39047-6380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) MS. REGION MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 36.04

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504744
 Amount of Each Receipt this Period 26.30
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. WATROUS, CHUCK, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 196 WOODLANDS GREEN DR.
 City BRANDON State MS Zip Code 39047-8796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOURCE MANAGEMENT SERIVE, LLC Occupation (for Individual) DISTRICT MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 132.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11A.504723
 Amount of Each Receipt this Period 96.32
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**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 802 OF 1054
	<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)
Team Ryan

A. SOUTH TEXAS MONEY MANAGEMENT LTD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 N ST MARY'S ST STE 100
 City SAN ANTONIO State TX Zip Code 78205-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11A.508859
 Amount of Each Receipt this Period 2700.00
 Memo Item
CONTRIBUTION
 REFUNDED \$2,700.00 ON 06/16/2017

B. STRATEGIC EQUITY PARTNERS, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1635 WESTERN AVE
 City KNOXVILLE State TN Zip Code 37921-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512040
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION
 VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;
 SEE ATTRIBUTION BELOW

C. JUBRAN, RAJA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1635 WESTERN AVE
 City KNOXVILLE State TN Zip Code 37921-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 STRATEGIC EQUITY PARTNERS MANAGING MEMBER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11A.512549
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	27700.00
TOTAL This Period (last page this line number only).....▶	

**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 803 OF 1054
<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)
Team Ryan

A. SUGAR CREEK PACKING CO
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 495 OLD CHILLICOTHE RD SE

City WASHINGTON COURT H	State OH	Zip Code 43160-9053
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2017

Transaction ID : SA11A.507894

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

REFUNDED \$25,000.00 ON 06/06/2017

B. THE ROTH FIRM
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 950 E PACES FERRY RD STE 1650

City ATLANTA	State GA	Zip Code 30326-1302
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2017

Transaction ID : SA11A.508858

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

REFUNDED \$1,000.00 ON 06/30/2017

C. WISCONSIN MEDICAL SOCIETY FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1109

City MADISON	State WI	Zip Code 53701-1109
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2017

Transaction ID : SA11A.504792

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....	26000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 804 OF 1054	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEE, DON, S., DR., M.D.

Mailing Address **9751 W PRAIRIE GRASS WAY**

City FRANKLIN	State WI	Zip Code 53132-7201
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLUMBIA ST. MARY'S	Occupation (for Individual) PHYSICIAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
05 / 16 / 2017

Transaction ID : SA11A.504796

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

EARMARKED FROM WISCONSIN MEDICAL SOCIETY FEDERAL PAC

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	9086950.96

**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 805 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. CHAMBLISS FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address POST OFFICE BOX 12469

City ATLANTA	State GA	Zip Code 30355-2469
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00266932

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : SA11C.505667

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. CRAWFORD FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 16956

City JONESBORO	State AR	Zip Code 72403-6716
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00462374

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2017

Transaction ID : SA11C.504795

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. DUNCAN FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2646

City KNOXVILLE	State TN	Zip Code 37901-2646
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FEC ID number of contributing federal political committee. **C** C00229104

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2017

Transaction ID : SA11C.508964

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

**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 806 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. AARON'S INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 309 EAST PACES FERRY ROAD, N.E.
City ATLANTA State GA Zip Code 30305-2367
FEC ID number of contributing federal political committee. **C** C00459933
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11C.504793
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. ACCENTURE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 800 CONNECTICUT AVE NW STE 600
City WASHINGTON State DC Zip Code 20006-2716
FEC ID number of contributing federal political committee. **C** C00300707
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11C.500927
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. ADVANCED MEDICAL TECHNOLOGY ASSN. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 701 PENNSYLVANIA AVENUE NW SUITE 800
City WASHINGTON State DC Zip Code 20004-2654
FEC ID number of contributing federal political committee. **C** C00340356
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11C.502934
Amount of Each Receipt this Period 2000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00
TOTAL This Period (last page this line number only)..... ▶

**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 807 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. AGSH&F CIVIC ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1333 NEW HAMPSHIRE AVENUE NW
SUITE 400

City WASHINGTON State DC Zip Code 20036-1532

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2017

Transaction ID : SA11C.512289

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. AIR LINE PILOTS ASSOC INT'L PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 MASSACHUSETTS AVENUE NW

City WASHINGTON State DC Zip Code 20036-2212

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017

Transaction ID : SA11C.500816

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. AIR LINE PILOTS ASSOC INT'L PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 MASSACHUSETTS AVENUE NW

City WASHINGTON State DC Zip Code 20036-2212

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017

Transaction ID : SA11C.500823

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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 808 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. AIR LINE PILOTS ASSOC INT'L PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1625 MASSACHUSETTS AVENUE NW

City WASHINGTON	State DC	Zip Code 20036-2212
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500838

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. AK STEEL CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9227 CENTRE POINTE DRIVE

City WEST CHESTER	State OH	Zip Code 45069-4822
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FEC ID number of contributing federal political committee. **C** C00290973

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11C.505663

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. AMEREN FEDERAL POLITICAL ACTION COMMITTEE (AMERENFED PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1331 PENNSYLVANIA AVENUE NW
SUITE 550S

City WASHINGTON	State DC	Zip Code 20229-1100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00206136

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500835

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**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 809 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 725 FIFTEENTH ST., NW SUITE 500

City WASHINGTON	State DC	Zip Code 20005-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00413955

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500829

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. AMERICAN ACADEMY OF OTOLARYNGOLOGY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1650 DIAGONAL ROAD

City ALEXANDRIA	State VA	Zip Code 22314-2857
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00306449

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500847

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. AMERICAN ACADEMY OF NEUROLOGY PROF ASSOC (BRAIN PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 201 CHICAGO AVE

City MINNEAPOLIS	State MN	Zip Code 55415-1126
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00435933

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2017

Transaction ID : SA11C.506578

Amount of Each Receipt this Period
7500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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 810 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. AMERICAN ASSOC. OF CLINICAL UROLOGISTS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 15441

City WASHINGTON	State DC	Zip Code 20003-0441
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00273003

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 02 / 2017
Transaction ID : SA11C.507910

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. AMERICAN BAKERS ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1300 I STREET NW STE. 700W

City WASHINGTON	State DC	Zip Code 20005-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00016386

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2017
Transaction ID : SA11C.504395

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. AMERICAN BEVERAGE ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 16TH STREET NW

City WASHINGTON	State DC	Zip Code 20036-4803
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00100107

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2017
Transaction ID : SA11C.506585

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

**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 811 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. AMERICAN BEVERAGE ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 16TH STREET NW
City WASHINGTON State DC Zip Code 20036-4803
FEC ID number of contributing federal political committee. **C** C00100107
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 26 / 2017
Transaction ID : SA11C.506586
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. AMERICAN BAKERS ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1300 I STREET NW STE. 700W
City WASHINGTON State DC Zip Code 20005-
FEC ID number of contributing federal political committee. **C** C00016386
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 14 / 2017
Transaction ID : SA11C.522520
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. AMERICAN COUNCIL OF ENGINEERING CO. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1015 15TH STREET NW SUITE 802
City WASHINGTON State DC Zip Code 20005-2605
FEC ID number of contributing federal political committee. **C** C00010868
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11C.504634
Amount of Each Receipt this Period 2700.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10200.00
TOTAL This Period (last page this line number only).....▶

**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 812 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AMERICAN CHIROPRACTIC ASSOCIATION PAC

Mailing Address 1701 CLARENDON BOULEVARD

City ARLINGTON	State VA	Zip Code 22209-2799
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FEC ID number of contributing federal political committee. **C** C00102764

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11C.504635

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. AMERICAN DENTAL PAC

Mailing Address 1111 14TH STREET NW
SUITE 1100

City WASHINGTON	State DC	Zip Code 20005-5627
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11C.504637

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AMERICAN DENTAL PAC

Mailing Address 1111 14TH STREET NW
SUITE 1100

City WASHINGTON	State DC	Zip Code 20005-5627
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11C.504640

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 813 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. AMERICAN ELECTRIC POWER PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 801 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20004-2615
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00096842

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500825

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. AMERICAN ELECTRIC POWER PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 801 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20004-2615
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00096842

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500840

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. AMERICAN EXPRESS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 801 PENNSYLVANIA AVE NW STE 650

City WASHINGTON	State DC	Zip Code 20004-2673
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040535

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11C.504249

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 814 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AMERICAN FAMILY MUTUAL INSURANCE CO. PAC

Mailing Address **6000 AMERICAN PARKWAY**

City MADISON	State WI	Zip Code 53783-0001
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FEC ID number of contributing federal political committee. **C C00354290**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 12 / 2017

Transaction ID : SA11C.504632

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. AMERICAN FUELS AND PETROCHEMICAL MANUFACTURERS PAC

Mailing Address **1667 K STREET NW
SUITE 700**

City WASHINGTON	State DC	Zip Code 20006-1654
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FEC ID number of contributing federal political committee. **C C00415026**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 12 / 2017

Transaction ID : SA11C.509441

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC

Mailing Address **PALLADIAN 1**

City DURHAM	State NC	Zip Code 27707-
-----------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C C00077321**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
05 / 03 / 2017

Transaction ID : SA11C.503809

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 815 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PALLADIAN 1

City DURHAM	State NC	Zip Code 27707-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11C.504247

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. AMERICAN INVESTMENT COUNCIL PAC (AIC PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 799 9TH STREET NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20001-5324
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00495002

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11C.505660

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. AMERICAN OSTEOPATHIC PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1090 VERMONT AVENUE NW
SUITE 510

City WASHINGTON	State DC	Zip Code 20005-4949
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FEC ID number of contributing federal political committee. **C** C00113803

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2017

Transaction ID : SA11C.512290

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 816 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. AMERICAN VET MEDICAL ASSOC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1910 SUNDERLAND PLACE NW

City WASHINGTON	State DC	Zip Code 20036-1608
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00114132

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2017
Transaction ID : SA11C.504254

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. AMO VOLUNTARY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 66
2 W DIXIE HIGHWAY

City DANIA	State FL	Zip Code 33004-0066
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2017
Transaction ID : SA11C.512751

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. ANADARKO PETROLEUM CORP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 LAKE ROBBINS DRIVE

City THE WOODLANDS	State TX	Zip Code 77380-1181
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00231951

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017
Transaction ID : SA11C.508845

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	

**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 817 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. AON PAC		Date of Receipt
Mailing Address 200 EAST RANDOLPH DRIVE		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City CHICAGO	State IL	Zip Code 60601-6436
FEC ID number of contributing federal political committee. C C00211250		Transaction ID : SA11C.506055
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ARCHER DANIELS MIDLAND PAC (ADM PAC)		Date of Receipt
Mailing Address P.O. BOX 1470		<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2017"/>
City DECATUR	State IL	Zip Code 62525-1820
FEC ID number of contributing federal political committee. C C00093963		Transaction ID : SA11C.500859
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ASSOCIATED BUILDERS AND CONTRACTORS PAC		Date of Receipt
Mailing Address 4250 NORTH FAIRFAX DRIVE 9TH FL		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2017"/>
City ARLINGTON	State VA	Zip Code 22203-1665
FEC ID number of contributing federal political committee. C C00010421		Transaction ID : SA11C.501625
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 818 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. ASSOCIATED BUILDERS AND CONTRACTORS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4250 NORTH FAIRFAX DRIVE 9TH FL
City ARLINGTON State VA Zip Code 22203-1665
FEC ID number of contributing federal political committee. **C** C00010421
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : SA11C.512042
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. ASSOCIATION OF EQUIPMENT MANUFACTURERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1000 VERMONT AVENUE, NW SUITE 450
City WASHINGTON State DC Zip Code 20005-4929
FEC ID number of contributing federal political committee. **C** C00442996
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11C.502901
Amount of Each Receipt this Period 15000.00
 Memo Item
CONTRIBUTION

C. ASSOCIATION OF OIL PIPE LINES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1808 EYE STREET NW SUITE 300
City WASHINGTON State DC Zip Code 20006-5423
FEC ID number of contributing federal political committee. **C** C00486779
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2017
Transaction ID : SA11C.508849
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	22500.00
TOTAL This Period (last page this line number only).....	

**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 819 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. AXA EQUITABLE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1290 AVENUE OF THE AMERICANS

City NEW YORK	State NY	Zip Code 10104-0101
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00161901

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2017

Transaction ID : SA11C.512287

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. AXA EQUITABLE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1290 AVENUE OF THE AMERICANS

City NEW YORK	State NY	Zip Code 10104-0101
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00161901

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2017

Transaction ID : SA11C.512288

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. BECHTEL GROUP, INC. POLITICAL ACTION COMMITTEE (BECHTEL POLI
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 50 BEALE STREET

City SAN FRANCISCO	State CA	Zip Code 94105-1813
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00103697

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2017

Transaction ID : SA11C.512001

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 820 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. BECTON, DICKINSON & COMPANY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 BECTON DRIVE
City FRANKLIN LAKES State NJ Zip Code 07417-1815
FEC ID number of contributing federal political committee. **C** C00376582
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11C.500844
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. BERKSHIRE HATHAWAY ENERGY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 666 GRAND AVE PO BOX 657
City DES MOINES State IA Zip Code 50309-2506
FEC ID number of contributing federal political committee. **C** C00324483
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11C.500925
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. BLUEPAC - BLUE CROSS AND BLUE SHIELD ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1310 G STREET NW
City WASHINGTON State DC Zip Code 20005-3000
FEC ID number of contributing federal political committee. **C** C00194746
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11C.505656
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 821 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. BRACEPAC

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

Mailing Address 2000 K STREET NW
SUITE 500

City WASHINGTON State DC Zip Code 20006-1809

FEC ID number of contributing federal political committee. **C** C00021295

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2017

Transaction ID : SA11C.506589

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. BRISTOL-MEYERS SQUIBB CO. EMPLOYEE PAC

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

Mailing Address 801 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2615

FEC ID number of contributing federal political committee. **C** C00035675

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2017

Transaction ID : SA11C.503812

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. BROOKE HOLDINGS LLC AND JACKSON NATIONAL LIFE INSURANCE COMP

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

Mailing Address 1 CORPORATE WAY

City LANSING State MI Zip Code 48951-1001

FEC ID number of contributing federal political committee. **C** C00254953

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
04 / 10 / 2017

Transaction ID : SA11C.500928

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11500.00
TOTAL This Period (last page this line number only).....	

**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 822 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. BROWNSTEIN HYATT FARBER SCHRECK PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 410 17TH ST 22ND FLOOR

City DENVER	State CO	Zip Code 80202-4437
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00390583

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2017

Transaction ID : SA11C.509439

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. C.H. ROBINSON WORLDWIDE INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14701 CHARLSON ROAD

City EDEN PRAIRIE	State MN	Zip Code 55347-5076
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00512673

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2017

Transaction ID : SA11C.508922

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. CAPELLA EDUCATION COMPANY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 225 SOUTH 6TH STREET 9TH FLOOR

City MINNEAPOLIS	State MN	Zip Code 55402-4319
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00486209

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2017

Transaction ID : SA11C.510533

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9500.00
TOTAL This Period (last page this line number only).....	

**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 823 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CAPITAL GROUP COMPANIES INC PAC

Mailing Address 333 S HOPE ST

City LOS ANGELES	State CA	Zip Code 90071-1406
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00540518

Name of Employer (for Individual) Occupation (for Individual)

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
05	/	12	/	2017

Transaction ID : SA11C.504620

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CAPITAL GROUP COMPANIES INC PAC

Mailing Address 333 S HOPE ST

City LOS ANGELES	State CA	Zip Code 90071-1406
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00540518

Name of Employer (for Individual) Occupation (for Individual)

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
05	/	12	/	2017

Transaction ID : SA11C.504627

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CAPITAL GROUP COMPANIES INC PAC

Mailing Address 333 S HOPE ST

City LOS ANGELES	State CA	Zip Code 90071-1406
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00540518

Name of Employer (for Individual) Occupation (for Individual)

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
05	/	12	/	2017

Transaction ID : SA11C.504630

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25000.00
TOTAL This Period (last page this line number only).....	

**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 824 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1680 CAPITAL ONE DRIVE
 ATTN 19050-120
 City MCLEAN State VA Zip Code 22102-3407
 FEC ID number of contributing federal political committee. **C** C00326595
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11C.500924
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1680 CAPITAL ONE DRIVE
 ATTN 19050-120
 City MCLEAN State VA Zip Code 22102-3407
 FEC ID number of contributing federal political committee. **C** C00326595
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11C.500930
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. CARESOURCE MANAGEMENT SERVICES PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 N. MAIN STREET
 City DAYTON State OH Zip Code 45402-1263
 FEC ID number of contributing federal political committee. **C** C00424879
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 22 / 2017
Transaction ID : SA11C.505662
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 12500.00
TOTAL This Period (last page this line number only).....▶

**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 825 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. CATERPILLAR EMPLOYEE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 NE ADAMS STREET

City PEORIA	State IL	Zip Code 61629-0001
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2017

Transaction ID : SA11C.510534

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. CHESAPEAKE ENERGY CORPORATION FED-PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 18496

City OKLAHOMA CITY	State OK	Zip Code 73154-0496
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00389288

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11C.508926

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. CHEVRON EMPLOYEE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 6016

City SAN RAMON	State CA	Zip Code 94583-0716
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2017

Transaction ID : SA11C.512060

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**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 826 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. CHUBB-ACE GROUP HOLDINGS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 436 WALNUT STREET

City PHILADELPHIA	State PA	Zip Code 19106-3703
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00348938

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500833

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. CITYPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 745 MARION AVE

City HIGHLAND PARK	State IL	Zip Code 60035-5123
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00187526

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2017

Transaction ID : SA11C.507923

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. CME GROUP PAC (CHICAGO MERCANTILE)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 SOUTH WACKER DRIVE

City CHICAGO	State IL	Zip Code 60606-7431
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500819

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

**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 827 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. CME GROUP PAC (CHICAGO MERCANTILE)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 SOUTH WACKER DRIVE

City CHICAGO	State IL	Zip Code 60606-7431
FEC ID number of contributing federal political committee. C C00076299		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017
Transaction ID : SA11C.500842

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. COEUR MINING PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 104 S. MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60603-5902
FEC ID number of contributing federal political committee. C C00563072		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
MM / DD / YYYY
06 / 02 / 2017
Transaction ID : SA11C.507888

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. COMMITTEE FOR ADVANCEMENT OF COTTON
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 2995

City CORDOVA	State TN	Zip Code 38088-2995
FEC ID number of contributing federal political committee. C C00023028		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2500.00	

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017
Transaction ID : SA11C.508934

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

**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 828 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. CONCHO RESOURCES INC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 701 8TH STREET NW SUITE 500

City WASHINGTON	State DC	Zip Code 20001-3965
FEC ID number of contributing federal political committee. C C00542092		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017
Transaction ID : SA11C.508931

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. CONSTELLATION BRANDS INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 207 HIGH POINT DR

City VICTOR	State NY	Zip Code 14564-1061
FEC ID number of contributing federal political committee. C C00304832		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Date of Receipt
MM / DD / YYYY
06 / 02 / 2017
Transaction ID : SA11C.507900

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. CONSUMER BANKERS ASSOCIATION PAC (CBAPAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1225 EYE STREET, NW, SUITE 550

City WASHINGTON	State DC	Zip Code 20005-5993
FEC ID number of contributing federal political committee. C C00035535		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 15000.00	

Date of Receipt
MM / DD / YYYY
05 / 08 / 2017
Transaction ID : SA11C.504256

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	35000.00
TOTAL This Period (last page this line number only).....▶	

**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 829 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. CONSUMER BANKERS ASSOCIATION PAC (CBAPAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1225 EYE STREET, NW, SUITE 550

City WASHINGTON	State DC	Zip Code 20005-5993
FEC ID number of contributing federal political committee. C C00035535		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2017
Transaction ID : SA11C.512003

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. CONTINENTAL RESOURCES, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 N BROADWAY

City OKLAHOMA CITY	State OK	Zip Code 73102-9213
FEC ID number of contributing federal political committee. C C00551184		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017
Transaction ID : SA11C.508846

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. CONTINUUM FUND OF ZACHRY HOLDINGS, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 527 LOGWOOD AVENUE

City SAN ANTONIO	State TX	Zip Code 78221-1738
FEC ID number of contributing federal political committee. C C00471565		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017
Transaction ID : SA11C.508843

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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 830 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. COUNCIL OF INSURANCE AGENTS & BROKERS PAC

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

Mailing Address 701 PENNSYLVANIA AVE NW
STE 750

City WASHINGTON State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2017

Transaction ID : SA11C.504253

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. COX ENTERPRISES PAC

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

Mailing Address 975 F STREET NW STE. 300

City WASHINGTON State DC Zip Code 20004-1459

FEC ID number of contributing federal political committee. **C** C00477653

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2017

Transaction ID : SA11C.512746

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. COX ENTERPRISES PAC

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

Mailing Address 975 F STREET NW STE. 300

City WASHINGTON State DC Zip Code 20004-1459

FEC ID number of contributing federal political committee. **C** C00477653

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2017

Transaction ID : SA11C.512784

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	

**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 831 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. CUNA MUTUAL PAC

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

Mailing Address P.O. BOX 747

City MADISON	State WI	Zip Code 53701-0747
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00402107

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2017

Transaction ID : SA11C.506593

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. DEAN FOODS COMPANY PAC

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

Mailing Address 2711 NORTH HASKELL AVENUE
STE. 3400

City DALLAS	State TX	Zip Code 75204-2928
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00340083

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11C.508844

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. DECPAC DEVON ENERGY CO PAC

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

Mailing Address 20 N BROADWAY AVENUE

City OKLAHOMA CITY	State OK	Zip Code 73102-8202
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00354753

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11C.508978

Amount of Each Receipt this Period
9000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	16500.00
TOTAL This Period (last page this line number only).....	

**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 832 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. DELTA AIR LINES POLITICAL ACTION COMMITTEE

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

Mailing Address 1212 NEW YORK AVENUE NW
SUITE 200

City WASHINGTON State DC Zip Code 20005-6609

FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2017

Transaction ID : SA11C.506588

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. DEPOSITORY TRUST AND CLEARING CORPORATION PAC

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

Mailing Address 1455 PENNSYLVANIA AVE., NW
SUITE 725

City WASHINGTON State DC Zip Code 20004-1036

FEC ID number of contributing federal political committee. **C** C00497917

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2017

Transaction ID : SA11C.503813

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. DEPOSITORY TRUST AND CLEARING CORPORATION PAC

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

Mailing Address 1455 PENNSYLVANIA AVE., NW
SUITE 725

City WASHINGTON State DC Zip Code 20004-1036

FEC ID number of contributing federal political committee. **C** C00497917

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2017

Transaction ID : SA11C.505661

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 833 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. DIANE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1437

City GALLATIN	State TN	Zip Code 37066-1437
FEC ID number of contributing federal political committee. C C00499996		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017
Transaction ID : SA11C.508969

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. DIRECT SUPPLY, INC PARTNERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 L STREET NW

City WASHINGTON	State DC	Zip Code 20005-4024
FEC ID number of contributing federal political committee. C C00409516		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 40000.00	

Date of Receipt
MM / DD / YYYY
05 / 12 / 2017
Transaction ID : SA11C.504631

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. DR. PEPPER SNAPPLE GROUP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5301 LEGACY DR

City PLANO	State TX	Zip Code 75024-3109
FEC ID number of contributing federal political committee. C C00484451		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017
Transaction ID : SA11C.500830

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25000.00
TOTAL This Period (last page this line number only).....	

**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 834 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. EBAY INC. COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE

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

Mailing Address 228 S. WASHINGTON ST. STE. 115

City ALEXANDRIA	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00342394

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2017

Transaction ID : SA11C.507884

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. ECHOSTAR CORP. AND DISH NETWORK CORP. PAC

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

Mailing Address 1110 VERMONT AVENUE NW SUITE 750

City WASHINGTON	State DC	Zip Code 20005-6322
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00330647

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2017

Transaction ID : SA11C.502898

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. ECOPAC

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

Mailing Address 370 WABASHA STREET N

City SAINT PAUL	State MN	Zip Code 55102-1323
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00101485

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2017

Transaction ID : SA11C.512061

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

**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 835 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. EDWARD JONES PAC		Date of Receipt MM / DD / YYYY 04 / 05 / 2017 Transaction ID : SA11C.500834
Mailing Address 12555 MANCHESTER ROAD		Amount of Each Receipt this Period 2500.00
City SAINT LOUIS	State MO	Zip Code 63131-3710
FEC ID number of contributing federal political committee. C C00410407		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ELECTRONIC TRANSACTIONS ASSOC. PAC (ETAPAC)		Date of Receipt MM / DD / YYYY 05 / 22 / 2017 Transaction ID : SA11C.505863
Mailing Address 1620 L STREET NW SUITE 1020		Amount of Each Receipt this Period 2500.00
City WASHINGTON	State DC	Zip Code 20036-5629
FEC ID number of contributing federal political committee. C C00548198		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 04 / 05 / 2017 Transaction ID : SA11C.500814
Mailing Address LILLY CORPORATE CENTER		Amount of Each Receipt this Period 5000.00
City INDIANAPOLIS	State IN	Zip Code 46285-0001
FEC ID number of contributing federal political committee. C C00082792		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**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 836 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

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

Mailing Address **LILLY CORPORATE CENTER**

City INDIANAPOLIS	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C C00082792**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
04 / 05 / 2017

Transaction ID : SA11C.500831

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. ENPAC

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

Mailing Address **101 CONSTITUTION AVENUE NW
SUITE 200**

City WASHINGTON	State DC	Zip Code 20001-2133
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FEC ID number of contributing federal political committee. **C C00363879**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
04 / 05 / 2017

Transaction ID : SA11C.500845

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. EQT CORPORATION PAC

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

Mailing Address **EQT PLAZA
625 LIBERTY AVENUE, SUITE 1700**

City PITTSBURGH	State PA	Zip Code 15222-3114
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FEC ID number of contributing federal political committee. **C C00151175**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
04 / 25 / 2017

Transaction ID : SA11C.502936

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

**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 837 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. ERNST & YOUNG PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 NEW YORK AVE NW

City WASHINGTON	State DC	Zip Code 20005-4269
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2017
Transaction ID : SA11C.503811

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. ESOP ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1726 M ST NW STE 501

City WASHINGTON	State DC	Zip Code 20036-4522
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FEC ID number of contributing federal political committee. **C** C00196089

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017
Transaction ID : SA11C.500848

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. ESOP ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1726 M ST NW STE 501

City WASHINGTON	State DC	Zip Code 20036-4522
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FEC ID number of contributing federal political committee. **C** C00196089

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2017
Transaction ID : SA11C.512000

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**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 838 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. EXELON CORPORATION POLITICAL ACTION COMMITTEE

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

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 400 E

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017

Transaction ID : SA11C.500818

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. EXPRESS SCRIPTS, INC. PAC

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

Mailing Address ONE EXPRESS WAY

City ST LOUIS State MO Zip Code 63121-1824

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2017

Transaction ID : SA11C.504252

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

C. EXPRESS SERVICES INC PAC

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

Mailing Address 9701 BOARDWALK BLVD

City OKLAHOMA CITY State OK Zip Code 73162-6029

FEC ID number of contributing federal political committee. **C** C00302240

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017

Transaction ID : SA11C.508963

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	22500.00
TOTAL This Period (last page this line number only).....	

**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 839 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. FIRSTENERGY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 76 S MAIN STREET
City AKRON State OH Zip Code 44308-1812
FEC ID number of contributing federal political committee. **C** C00140855
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11C.504624
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. FLOWERS FOODS POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1919 FLOWERS CIRCLE
City THOMASVILLE State GA Zip Code 31757-1137
FEC ID number of contributing federal political committee. **C** C00033555
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 16 / 2017
Transaction ID : SA11C.504794
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. FLUOR CORP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 403 E CAPITOL STREET SE
City WASHINGTON State DC Zip Code 20003-3810
FEC ID number of contributing federal political committee. **C** C00034132
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11C.500815
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00
TOTAL This Period (last page this line number only)..... ▶

**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 840 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. FLUOR CORP PAC

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

Mailing Address 403 E CAPITOL STREET SE

City WASHINGTON	State DC	Zip Code 20003-3810
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FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer (for Individual) Occupation (for Individual)

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
04		05		2017

Transaction ID : SA11C.500837

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. FLUOR CORP PAC

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

Mailing Address 403 E CAPITOL STREET SE

City WASHINGTON	State DC	Zip Code 20003-3810
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer (for Individual) Occupation (for Individual)

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
06		29		2017

Transaction ID : SA11C.512744

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

C. FOLEY & LARDNER POLITICAL FUND

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

Mailing Address 3000 K STREET NW
SUITE 500

City WASHINGTON	State DC	Zip Code 20007-5111
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FEC ID number of contributing federal political committee. **C** C00105338

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2017

Transaction ID : SA11C.500929

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	21500.00
TOTAL This Period (last page this line number only).....	

**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 841 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. FREEDOM PROJECT
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 228 S. WASHINGTON ST.
STE. 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
06 / 12 / 2017
Transaction ID : SA11C.509440

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

B. GLAXOSMITH KLINE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709-0143

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
04 / 05 / 2017
Transaction ID : SA11C.500855

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. GRIDIRON PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 345 PARK AVE

City NEW YORK State NY Zip Code 10154-0004

FEC ID number of contributing federal political committee. **C** C00451153

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
04 / 05 / 2017
Transaction ID : SA11C.500849

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 40000.00

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

**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 842 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. GUARDIAN LIFE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 705 E
City WASHINGTON State DC Zip Code 20001-2128
FEC ID number of contributing federal political committee. **C** C00173393
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 8000.00

Date of Receipt 04 / 25 / 2017
Transaction ID : SA11C.502899
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. GUARDIAN LIFE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 705 E
City WASHINGTON State DC Zip Code 20001-2128
FEC ID number of contributing federal political committee. **C** C00173393
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 8000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA11C.512785
Amount of Each Receipt this Period 3000.00
 Memo Item
CONTRIBUTION

C. HALL RENDER KILLIAN HEATH LYMAN EMP. PAC FEDERAL
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 AMERICAN SQ. STE. 2000
City INDIANAPOLIS State IN Zip Code 46282-0004
FEC ID number of contributing federal political committee. **C** C00552083
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 05 / 08 / 2017
Transaction ID : SA11C.504251
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13000.00
TOTAL This Period (last page this line number only).....	

**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 843 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. HALLIBURTON PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10200 BELLAIRE BOULEVARD

City HOUSTON	State TX	Zip Code 77072-5206
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035691

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2017

Transaction ID : SA11C.510544

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. HILL ROM PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1069 STATE ROAD 46 E

City BATESVILLE	State IN	Zip Code 47006-7520
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00448993

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2017

Transaction ID : SA11C.512791

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. HILMAR CHEESE CO. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9001 N. LANDER AVE.

City HILMAR	State CA	Zip Code 95324-8320
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00528299

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2017

Transaction ID : SA11C.507883

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9500.00
TOTAL This Period (last page this line number only).....	

**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 844 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. HOGAN LOVELLS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 13TH STREET NW

City WASHINGTON	State DC	Zip Code 20004-1109
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00261339

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2017

Transaction ID : SA11C.507886

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. HOLLAND & KNIGHT PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2099 PENNSYLVANIA AVENUE NW
SUITE 100

City WASHINGTON	State DC	Zip Code 20006-6801
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2017

Transaction ID : SA11C.507881

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. HOME DEPOT PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1155 F STREET, NW
SUITE 400

City WASHINGTON	State DC	Zip Code 20004-1346
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2017

Transaction ID : SA11C.512786

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	57500.00
TOTAL This Period (last page this line number only).....	

**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 845 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. HONEYWELL INTERNATIONAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CONSTITUTION AVENUE, NW
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2017

Transaction ID : SA11C.512063

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. HUMANA INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 975 F STREET NW STE. 550

City WASHINGTON State DC Zip Code 20004-1458

FEC ID number of contributing federal political committee. **C** C00271007

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2017

Transaction ID : SA11C.512749

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. INDEPENDENT COMMUNITY BANKERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1615 L STREET NW STE 900

City WASHINGTON State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017

Transaction ID : SA11C.500813

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**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 846 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. INTERNATIONAL COUNCIL OF SHOPPING CENTERS, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1166 AVENUE OF AMERICAS

City NEW YORK	State NY	Zip Code 10036-2708
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500850

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

B. INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1750 NEW YORK AVENUE NW

City WASHINGTON	State DC	Zip Code 20006-5305
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11C.505658

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

C. INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1750 NEW YORK AVENUE NW

City WASHINGTON	State DC	Zip Code 20006-5305
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11C.505665

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	45000.00
TOTAL This Period (last page this line number only).....▶	

**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 847 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. INTERNATIONAL FRANCHISE ASSOC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1900 K STREET NW
SUITE 700
City WASHINGTON State DC Zip Code 20006-1135
FEC ID number of contributing federal political committee. **C** C00084491
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 02 / 2017
Transaction ID : SA11C.507882
Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION

B. INTUIT INC. 21ST CENTURY LEADERSHIP FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2700 COAST AVE.
City MOUNTAIN VIEW State CA Zip Code 94043-1140
FEC ID number of contributing federal political committee. **C** C00361741
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 12 / 2017
Transaction ID : SA11C.504625
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. INVESTMENT COMPANY INSTITUTE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1401 H STREET NW #1200
City WASHINGTON State DC Zip Code 20005-2110
FEC ID number of contributing federal political committee. **C** C00105981
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11C.500821
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	

**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 848 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. IPAA WILDCATTER PAC FUND

Mailing Address 1201 15TH STREET NW

City WASHINGTON	State DC	Zip Code 20005-2899
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00246306

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2017

Transaction ID : SA11C.506044

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. IRANIAN AMERICAN PAC

Mailing Address 5335 WISCONSIN AVE. NW
SUITE 440

City WASHINGTON	State DC	Zip Code 20015-2079
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00382028

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2017

Transaction ID : SA11C.506580

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. JOHN HANCOCK LIFE INS CO PAC

Mailing Address 601 CONGRESS STREET
FLOOR 13

City BOSTON	State MA	Zip Code 02210-2805
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00137265

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2017

Transaction ID : SA11C.512002

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	22500.00
TOTAL This Period (last page this line number only).....	

**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 849 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. KROGER POLITICAL ACTION COMMITTEE

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

Mailing Address 1014 VINE STREET

City CINCINNATI	State OH	Zip Code 45202-1141
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00059238

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 02 / 2017

Transaction ID : SA11C.507887

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. LABORERS' INTERN UNION OF N.AMERICAN PAC

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

Mailing Address 905 16TH STREET NW

City WASHINGTON	State DC	Zip Code 20006-1703
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2017

Transaction ID : SA11C.510545

Amount of Each Receipt this Period
30000.00

Memo Item
CONTRIBUTION

C. LPL FINANCIAL LLC POLITICAL ACTION COMMITTEE (LPL PAC)

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

Mailing Address 75 STATE STREET
FLOOR 24

City BOSTON	State MA	Zip Code 02109-1827
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00486217

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2017

Transaction ID : SA11C.500851

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	40000.00
TOTAL This Period (last page this line number only).....	

**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 850 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. MACANDREWS AND FORBES INC PAC (MAFPAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 35 EAST 62ND STREET

City NEW YORK	State NY	Zip Code 10065-8014
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00432856

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2017
Transaction ID : SA11C.504321

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. MANAGEMENT & TRAINING CORP. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 NORTH MARKETPLACE DRIVE

City CENTERVILLE	State UT	Zip Code 84014-1708
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00208322

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2017
Transaction ID : SA11C.500932

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. MCLANE CO FEDERAL PAC (MAC-PAC-USA)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4747 MCLANE PARKWAY

City TEMPLE	State TX	Zip Code 76504-4854
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00215558

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2017
Transaction ID : SA11C.508841

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25000.00
TOTAL This Period (last page this line number only).....	

**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 851 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. MERCK EMPLOYEES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 601 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20004-2601
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500817

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. MERCK EMPLOYEES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 601 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20004-2601
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500824

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. MERCK EMPLOYEES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 601 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20004-2601
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500839

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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 852 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MFA PAC		Date of Receipt
Mailing Address PO BOX 21664		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City ROANOKE	State VA	Zip Code 24018-0168
FEC ID number of contributing federal political committee. C C00467639		Transaction ID : SA11C.506042
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MFA PAC		Date of Receipt
Mailing Address PO BOX 21664		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City ROANOKE	State VA	Zip Code 24018-0168
FEC ID number of contributing federal political committee. C C00467639		Transaction ID : SA11C.506043
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MICRONPAC		Date of Receipt
Mailing Address 8000 S. FEDERAL WAY MS 1-407		<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2017"/>
City BOISE	State ID	Zip Code 83716-9632
FEC ID number of contributing federal political committee. C C00443671		Transaction ID : SA11C.500857
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="20000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 853 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. MILLER COORS LLC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1501 M STREET NW
SUITE 330

City WASHINGTON State DC Zip Code 20005-1701

FEC ID number of contributing federal political committee. **C** C00457697

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2017

Transaction ID : SA11C.504798

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. MORTGAGE BANKERS ASSOC. OF AMERICA
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 M STREET NW
FLOOR 5

City WASHINGTON State DC Zip Code 20036-3572

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2017

Transaction ID : SA11C.504626

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. MURPHY OIL CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 PEACH STREET
P.O. BOX 7000

City EL DORADO State AR Zip Code 71731-7000

FEC ID number of contributing federal political committee. **C** C00145722

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2017

Transaction ID : SA11C.505664

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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 854 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. NATIONAL ASSOCIATION OF TRUCK STOP OPERATORS (NATSO PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 BRADDOCK PLACE, SUITE 501
 City ALEXANDRIA State VA Zip Code 22314-1650
 FEC ID number of contributing federal political committee. **C** C00097865
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **04 / 25 / 2017**
Transaction ID : SA11C.502935
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. NATIONAL ASSOCIATION OF REALTORS PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 NORTH MICHIGAN AVE.
 City CHICAGO State IL Zip Code 60611-4011
 FEC ID number of contributing federal political committee. **C** C00030718
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11C.504639
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. NATIONAL ASSOCIATION OF BROADCASTERS PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1771 N STREET NW
 City WASHINGTON State DC Zip Code 20036-2800
 FEC ID number of contributing federal political committee. **C** C00009985
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 29 / 2017**
Transaction ID : SA11C.512745
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

**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 855 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. NATIONAL BEER WHOLESALE ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 KING ST STE 600

City ALEXANDRIA	State VA	Zip Code 22314-2965
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2017

Transaction ID : SA11C.512059

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. NATIONAL BEER WHOLESALE ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 KING ST STE 600

City ALEXANDRIA	State VA	Zip Code 22314-2965
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2017

Transaction ID : SA11C.512062

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. NATIONAL MULTIFAMILY HOUSING COMMITTEE PAC (NMHC PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1850 M STREET, NW
SUITE 540

City WASHINGTON	State DC	Zip Code 20036-5816
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2017

Transaction ID : SA11C.512043

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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 856 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. NATIONAL OCEAN INDUSTRIES ASSOC PAC

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

Mailing Address 1120 G STREET NW
SUITE 900

City WASHINGTON State DC Zip Code 20005-3801

FEC ID number of contributing federal political committee. **C** C00409565

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2017

Transaction ID : SA11C.510536

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. NATIONAL ROOFING CONTRACTORS ASSOC. PAC

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

Mailing Address 324 FOURTH STREET NE

City WASHINGTON State DC Zip Code 20002-5824

FEC ID number of contributing federal political committee. **C** C00244863

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017

Transaction ID : SA11C.508851

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. NATIONAL TURKEY FEDERATION TURPAC

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

Mailing Address 1225 NEW YORK AVE NW
STE 400

City WASHINGTON State DC Zip Code 20005-6404

FEC ID number of contributing federal political committee. **C** C00076182

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2017

Transaction ID : SA11C.507906

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

**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 857 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. NAVIENT PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2001 EDMUND HALLEY DRIVE

City RESTON	State VA	Zip Code 20191-3436
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00331835

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11C.504250

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. NAVIENT PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2001 EDMUND HALLEY DRIVE

City RESTON	State VA	Zip Code 20191-3436
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00331835

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11C.504311

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. NEWFIELD PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4 WATERWAY SQUARE PL, STE 100

City THE WOODLANDS	State TX	Zip Code 77380-2764
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00443523

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11C.512793

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	20000.00
TOTAL This Period (last page this line number only).....▶	

**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 858 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. NFIB SAFE TRUST
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 F STREET NW
SUITE 200

City WASHINGTON State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 24 / 2017

Transaction ID : SA11C.506048

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. NISOURCE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 290 W NATIONWIDE BOULEVARD

City COLUMBUS State OH Zip Code 43215-2561

FEC ID number of contributing federal political committee. **C** C00051979

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017

Transaction ID : SA11C.508847

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. NORTH CAROLINA FARM BUREAU FARM PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5301 GLENWOOD AVENUE

City RALEIGH State NC Zip Code 27612-3244

FEC ID number of contributing federal political committee. **C** C00216754

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2017

Transaction ID : SA11C.505678

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 859 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. NORTHWESTERN MUTUAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 720 E WISCONSIN AVE

City MILWAUKEE	State WI	Zip Code 53202-4703
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00197095

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2017

Transaction ID : SA11C.511963

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. NRA POLITICAL VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030-7550
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2017

Transaction ID : SA11C.500820

Amount of Each Receipt this Period
4950.00

Memo Item
CONTRIBUTION

C. NRA POLITICAL VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030-7550
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
14850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2017

Transaction ID : SA11C.500826

Amount of Each Receipt this Period
4950.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	19900.00
TOTAL This Period (last page this line number only).....	

**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 860 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. NRA POLITICAL VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030-7550
FEC ID number of contributing federal political committee. C C00053553		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 14850.00	

Date of Receipt
MM / DD / YYYY
04 / 05 / 2017
Transaction ID : SA11C.500843

Amount of Each Receipt this Period
4950.00

Memo Item
CONTRIBUTION

B. NSWA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2313 N BROADWAY

City ADA	State OK	Zip Code 74820-1068
FEC ID number of contributing federal political committee. C C00488080		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017
Transaction ID : SA11C.508981

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. OHIO NATIONAL FINANCIAL SERVICES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address ONE FINANCIAL WAY

City CINCINNATI	State OH	Zip Code 45242-5851
FEC ID number of contributing federal political committee. C C00296657		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2500.00	

Date of Receipt
MM / DD / YYYY
05 / 22 / 2017
Transaction ID : SA11C.505672

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	8450.00
TOTAL This Period (last page this line number only).....▶	

**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 861 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. OLD NATIONAL BANK PAC

Mailing Address **1 MAIN STREET**

City EVANSVILLE	State IN	Zip Code 47708-1464
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00165282**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
04 / 25 / 2017

Transaction ID : SA11C.502933

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ONEAMERICA FINANCIAL PARTNERS PAC

Mailing Address **ONE AMERICAN SQUARE
P.O. BOX 368**

City INDIANAPOLIS	State IN	Zip Code 46282-0020
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00143164**

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

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
06 / 16 / 2017

Transaction ID : SA11C.510547

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ONLINE LENDERS ALLIANCE PAC

Mailing Address **PO BOX 15480
SE STATION**

City WASHINGTON	State DC	Zip Code 20003-0480
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00427781**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
04 / 10 / 2017

Transaction ID : SA11C.500931

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 862 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ORACLE AMERICA INC. PAC		Date of Receipt MM / DD / YYYY 05 / 12 / 2017 Transaction ID : SA11C.504628
Mailing Address 1015 15TH STREET NW STE. 200		Amount of Each Receipt this Period 2500.00
City WASHINGTON	State DC	Zip Code 20005-2635
FEC ID number of contributing federal political committee. C C00323048		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. OSHKOSH CORP EMPLOYEES PAC		Date of Receipt MM / DD / YYYY 06 / 29 / 2017 Transaction ID : SA11C.512752
Mailing Address P.O. BOX 2566		Amount of Each Receipt this Period 2500.00
City OSHKOSH	State WI	Zip Code 54903-2566
FEC ID number of contributing federal political committee. C C00304477		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PACIFIC LIFE INSURANCE COMPANY PAC		Date of Receipt MM / DD / YYYY 05 / 08 / 2017 Transaction ID : SA11C.504248
Mailing Address 700 NEWPORT CENTER DR		Amount of Each Receipt this Period 2500.00
City NEWPORT BEACH	State CA	Zip Code 92660-6307
FEC ID number of contributing federal political committee. C C00068528		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 7500.00	

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

**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 863 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. PACIFIC LIFE INSURANCE COMPANY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 NEWPORT CENTER DR

City NEWPORT BEACH	State CA	Zip Code 92660-6307
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11C.512748

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. PACIFIC LIFE INSURANCE COMPANY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 NEWPORT CENTER DR

City NEWPORT BEACH	State CA	Zip Code 92660-6307
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : SA11C.512783

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. PAN AMERICAN LIFE INS. CO PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 601 POYDRAS ST
14TH FL

City NEW ORLEANS	State LA	Zip Code 70130-6029
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00232272

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2017

Transaction ID : SA11C.509443

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**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 864 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. PAYPAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2211 NORTH FIRST STREET

City SAN JOSE	State CA	Zip Code 95131-2021
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00581686

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2017
Transaction ID : SA11C.506591

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. PHARMACEUTICAL CARE MANAGEMENT ASSOC. PAC (PCMA PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 601 PENNSYLVANIA AVE NW STE 740S

City WASHINGTON	State DC	Zip Code 20004-2699
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FEC ID number of contributing federal political committee. **C** C00388819

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 29 / 2017
Transaction ID : SA11C.512787

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. PINNACLE WEST PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 400 N 5TH STREET

City PHOENIX	State AZ	Zip Code 85004-3902
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00015933

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2017
Transaction ID : SA11C.500852

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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 865 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. PNC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 249 5TH AVENUE

City PITTSBURGH	State PA	Zip Code 15222-2707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00186064

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2017

Transaction ID : SA11C.500933

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. PORK PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 10383

City DES MOINES	State IA	Zip Code 50306-0383
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00201871

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500858

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. POTLATCH EMPLOYEES POLITICAL FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 601 W 1ST AVENUE
SUITE 1600

City SPOKANE	State WA	Zip Code 99201-3807
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00041608

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2017

Transaction ID : SA11C.504636

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	17700.00
TOTAL This Period (last page this line number only).....	

**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 866 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. POWER PAC OF THE EDISON ELECTRIC INSTITUTE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 701 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20004-2608
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer (for Individual) Occupation (for Individual)

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
04	/	05	/	2017

Transaction ID : SA11C.500827

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. PPG INDUSTRIES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address ONE PPG PLACE
ATTN: GABE PELLATHY

City PITTSBURGH	State PA	Zip Code 15272-0001
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00034298

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2017

Transaction ID : SA11C.504255

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. PRINTPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1001 G STREET NW
SUITE 800

City WASHINGTON	State DC	Zip Code 20001-4545
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00018028

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2017

Transaction ID : SA11C.500853

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	40000.00
TOTAL This Period (last page this line number only).....	

**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 867 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PROTECTIVE LIFE CORP. FEDERAL PAC

Mailing Address P.O. BOX 2606

City BIRMINGHAM	State AL	Zip Code 35202-2606
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00161414

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2017

Transaction ID : SA11C.509442

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. PRUDENTIAL FINANCIAL STATE & FEDERAL PAC

Mailing Address 751 BROAD STREET
14TH FLOOR

City NEWARK	State NJ	Zip Code 07102-3714
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00493304

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2017

Transaction ID : SA11C.508842

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. REAL ESTATE INVESTMENT TRUSTS PAC

Mailing Address 1875 I ST NW STE 600

City WASHINGTON	State DC	Zip Code 20006-5413
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2017

Transaction ID : SA11C.512064

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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 868 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. RGA REINSURANCE COMPANY FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1370 TIMBERLAKE MANOR PKWY.
City CHESTERFIELD State MO Zip Code 63017-6039
FEC ID number of contributing federal political committee. **C** C00461129
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 26 / 2017**
Transaction ID : SA11C.506587
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. RICELAND FOODS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 927
City STUTTGART State AR Zip Code 72160-0927
FEC ID number of contributing federal political committee. **C** C00220053
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5400.00

Date of Receipt **05 / 03 / 2017**
Transaction ID : SA11C.504159
Amount of Each Receipt this Period 5400.00
 Memo Item
CONTRIBUTION

C. SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 NEW YORK AVENUE, NW 8TH FLOOR
City WASHINGTON State DC Zip Code 20005-4279
FEC ID number of contributing federal political committee. **C** C00431312
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 05 / 2017**
Transaction ID : SA11C.500846
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	15400.00
TOTAL This Period (last page this line number only).....▶	

**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 869 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. SHELL OIL COMPANY EMPLOYEE'S POLITICAL AWARENESS COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K STREET NW, SUITE 700
 City WASHINGTON State DC Zip Code 20001-4449
 FEC ID number of contributing federal political committee. **C** C00039503
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **05 / 26 / 2017**
Transaction ID : SA11C.506590
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. SIEMENS PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 NEW JERSEY AVENUE NW SUITE 1000
 City WASHINGTON State DC Zip Code 20001-2268
 FEC ID number of contributing federal political committee. **C** C00353797
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 02 / 2017**
Transaction ID : SA11C.507907
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. SMITHFIELD PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 K STREET, NW SUITE 400
 City WASHINGTON State DC Zip Code 20006-1040
 FEC ID number of contributing federal political committee. **C** C00359075
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **06 / 29 / 2017**
Transaction ID : SA11C.512790
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**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 870 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SOCIETY OF AMERICAN FLORISTS PAC

Mailing Address 1601 DUKE STREET

City ALEXANDRIA	State VA	Zip Code 22314-3406
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00111302

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500854

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SOUTHERN COMPANY - SOUTHERN NUCLEAR OPERATING COMPANY, INC.

Mailing Address 42 INVERNESS CENTER PARKWAY

City BIRMINGHAM	State AL	Zip Code 35242-4809
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00250407

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500822

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SOUTHERN COMPANY EMPLOYEES PAC

Mailing Address 241 RALPH MCGILL BLVD, NE
BIN 10115

City ATLANTA	State GA	Zip Code 30308-3374
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : SA11C.504310

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**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 871 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. SOUTHERN COMPANY - SOUTHERN NUCLEAR OPERATING COMPANY, INC.

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

Mailing Address 42 INVERNESS CENTER PARKWAY

City BIRMINGHAM	State AL	Zip Code 35242-4809
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00250407

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : SA11C.504797

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. SPRINT CORPORATION POLITICAL ACTION COMM

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

Mailing Address 12502 SUNRISE VALLEY DRIVE

City RESTON	State VA	Zip Code 20191-3438
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2017

Transaction ID : SA11C.500836

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. SYNCHRONY FINANCIAL EMPLOYEES PAC (SYNCPAC)

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

Mailing Address 777 LONG RIDGE ROAD

City STAMFORD	State CT	Zip Code 06902-1247
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00589119

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2017

Transaction ID : SA11C.508850

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

**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 872 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TESORO PAC

Mailing Address 19100 RIDGEWOOD PARKWAY

City SAN ANTONIO	State TX	Zip Code 78259-1834
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00358366

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2017

Transaction ID : SA11C.512302

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. THE AES CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 4300 WILSON BLVD

City ARLINGTON	State VA	Zip Code 22203-4167
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00507962

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2017

Transaction ID : SA11C.500832

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. THE HARTFORD ADVOCATES FUND PAC

Mailing Address 690 ASYLUM AVE.

City HARTFORD	State CT	Zip Code 06115-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00168864

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2017

Transaction ID : SA11C.506045

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	14000.00
TOTAL This Period (last page this line number only).....▶	

**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 873 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. THE WALT DISNEY PRODUCTIONS EMPLOYEES PAC		Date of Receipt
Mailing Address 425 3RD STREET SW SUITE 1100		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2017"/>
City WASHINGTON	State DC	Zip Code 20024-3227
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00197749"/>		Transaction ID : SA11C.512301
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. THRIVENT FINANCIAL FOR LUTHERANS PAC		Date of Receipt
Mailing Address PO BOX 1892		<input type="text" value="05"/> / <input type="text" value="03"/> / <input type="text" value="2017"/>
City APPLETON	State WI	Zip Code 54912-1892
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00121319"/>		Transaction ID : SA11C.503810
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TIAA-CREF PAC		Date of Receipt
Mailing Address 601 13TH STREET NW SUITE 700N		<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2017"/>
City WASHINGTON	State DC	Zip Code 20005-6711
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00431361"/>		Transaction ID : SA11C.510535
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 874 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. TRALAPAC (TRUCK RENTING AND LEASING ASSOCIATION PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N WASHINGTON ST
 STE 410
 City ALEXANDRIA State VA Zip Code 22314-1939
 FEC ID number of contributing federal political committee. **C** C00499400
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : SA11C.512789
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. TRANSPORTATION INTERMEDIARIES ASSOC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 PRINCE ST SUITE 200
 City ALEXANDRIA State VA Zip Code 22314-2883
 FEC ID number of contributing federal political committee. **C** C00335091
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2017
Transaction ID : SA11C.510546
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. TRUCK PAC OF AMER TRUCKING ASSOC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 1ST STREET SE
 City WASHINGTON State DC Zip Code 20003-1826
 FEC ID number of contributing federal political committee. **C** C00002881
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2017
Transaction ID : SA11C.507885
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 875 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. TURKISH COALITION USA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1025 CONNECTICUT AVE SUITE 1000

City WASHINGTON	State DC	Zip Code 20036-5417
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00432526

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2017
Transaction ID : SA11C.500856

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. UNITED TECHNOLOGIES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 PENNSYLVANIA AVENUE NW
FLOOR 10

City WASHINGTON	State DC	Zip Code 20004-2566
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2017
Transaction ID : SA11C.505659

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. UNITEDHEALTH GROUP INC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9900 BREN ROAD EAST

City MINNETONKA	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2017
Transaction ID : SA11C.500923

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 876 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. UNITEDHEALTH GROUP INC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9900 BREN ROAD EAST

City MINNETONKA	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
04 / 10 / 2017

Transaction ID : SA11C.500926

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. UNUM PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 FOUNTAIN SQUARE

City CHATTANOOGA	State TN	Zip Code 37402-1307
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00177436

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2017

Transaction ID : SA11C.512788

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. VANTIV GOOD GOVERNMENT FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8500 GOVERNORS HILL DRIVE

City SYMMES TWP	State OH	Zip Code 45249-1384
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00561647

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2017

Transaction ID : SA11C.505683

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

**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 877 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. VECTREN CORPORATION EMPLOYEES FEDERAL PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address VECTREN CORPORATION TREASURY DEPT.
 ONE VECTREN SQUARE
 City EVANSVILLE State IN Zip Code 47708-1209
 FEC ID number of contributing federal political committee. **C** C00240069
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt **05 / 12 / 2017**
Transaction ID : SA11C.504633
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. VEN-PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 83142
 City GAITHERSBURG State MD Zip Code 20883-3142
 FEC ID number of contributing federal political committee. **C** C00369660
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **06 / 29 / 2017**
Transaction ID : SA11C.512792
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. VOYA FINANCIAL, INC PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 PARK AVENUE
 City NEW YORK State NY Zip Code 10169-0005
 FEC ID number of contributing federal political committee. **C** C00184028
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **06 / 29 / 2017**
Transaction ID : SA11C.512747
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00
TOTAL This Period (last page this line number only)..... ▶

**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 878 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. WELLS FARGO EMPLOYEE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address SIXTH AND MARQUETTE
MAC N9305-084

City MINNEAPOLIS State MN Zip Code 55479-0001

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2017

Transaction ID : SA11C.504629

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. WEYERHAEUSER PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 9777

City FEDERAL WAY State WA Zip Code 98063-9777

FEC ID number of contributing federal political committee. **C** C00007948

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2017

Transaction ID : SA11C.504638

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. WILDCATTERS PAC OF THE OKLAHOMA INDEPENDENT PETROLEUM ASSN
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 N.E. 4TH STREET
SUITE 200

City OKLAHOMA CITY State OK Zip Code 73104-4043

FEC ID number of contributing federal political committee. **C** C00444430

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2017

Transaction ID : SA11C.508848

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 879 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Team Ryan

A. WPX ENERGY PAC

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

Mailing Address 3500 ONE WILLIAMS CENTER

City TULSA	State OK	Zip Code 74172-0135
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00502518

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2017

Transaction ID : SA11C.510537

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. XCEL ENERGY EMPLOYEE PAC

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

Mailing Address 1800 LARIMER STREET
FLOOR 1600

City DENVER	State CO	Zip Code 80202-1408
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2017

Transaction ID : SA11C.500841

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. XCEL ENERGY EMPLOYEE PAC

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

Mailing Address 1800 LARIMER STREET
FLOOR 1600

City DENVER	State CO	Zip Code 80202-1408
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
13000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2017

Transaction ID : SA11C.512066

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	1209650.00

**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 880 OF 1054
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Team Ryan

A. NRCC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 320 FIRST STREET SE
City WASHINGTON State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C** C00002931
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 87481.45

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 08 / 2017
Transaction ID : SA12.18757
Amount of Each Receipt this Period
55771.22
 Memo Item
TRANSFER FOR JFC EXPENSES (LEGAL FUND)

B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	55771.22
TOTAL This Period (last page this line number only).....	55771.22

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1797I

Amount of Each Disbursement this Period

971.13

Memo Item

Full Name (Last, First, Middle Initial)

B. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1823I

Amount of Each Disbursement this Period

971.14

Memo Item

Full Name (Last, First, Middle Initial)

C. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1838I

Amount of Each Disbursement this Period

971.13

Memo Item

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

2913.40

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC EVENT/TRAVEL (NO ITEMIZATION NECESSARY)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1840

Amount of Each Disbursement this Period

[REDACTED] 180.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I18634

Amount of Each Disbursement this Period

[REDACTED] 971.14

Memo Item

Full Name (Last, First, Middle Initial)

C. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1904

Amount of Each Disbursement this Period

[REDACTED] 971.13

Memo Item

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

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

[REDACTED] 2122.27

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1919!
Amount of Each Disbursement this Period
[] 971.14

Memo Item

Full Name (Last, First, Middle Initial)

B. DIVINCENTIS, ELIZABETH, , ,

Mailing Address 1920 14TH ST NW #707

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1797!
Amount of Each Disbursement this Period
[] 140.17

Memo Item

Full Name (Last, First, Middle Initial)

C. DIVINCENTIS, ELIZABETH, , ,

Mailing Address 1920 14TH ST NW #707

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1823
Amount of Each Disbursement this Period
[] 140.17

Memo Item

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

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

1	2	5	1	4	8
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. DIVINCENTIS, ELIZABETH, , ,		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017	
Mailing Address 1920 14TH ST NW #707		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1838I Amount of Each Disbursement this Period [REDACTED] 458.34	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type [REDACTED]
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. DIVINCENTIS, ELIZABETH, , ,		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address 1920 14TH ST NW #707		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1863I Amount of Each Disbursement this Period [REDACTED] 458.33	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type [REDACTED]
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. DIVINCENTIS, ELIZABETH, , ,		Date of Disbursement MM / DD / YYYY 06 / 14 / 2017	
Mailing Address 1920 14TH ST NW #707		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1904I Amount of Each Disbursement this Period [REDACTED] 458.33	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type [REDACTED]
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1375.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DIVINCENTIS, ELIZABETH, , ,

Mailing Address 1920 14TH ST NW #707

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1919

Amount of Each Disbursement this Period

458.34

Memo Item

Full Name (Last, First, Middle Initial)

B. GRIBBIN, BRIDGET, K, ,

Mailing Address 1618 19TH ST NW APT 7

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1797

Amount of Each Disbursement this Period

249.01

Memo Item

Full Name (Last, First, Middle Initial)

C. GRIBBIN, BRIDGET, K, ,

Mailing Address 1618 19TH ST NW APT 7

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1822

Amount of Each Disbursement this Period

249.00

Memo Item

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

956.35

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. GRIBBIN, BRIDGET, K, ,

Mailing Address 1618 19TH ST NW APT 7

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1919:
Amount of Each Disbursement this Period
[] 848.45

Memo Item

Full Name (Last, First, Middle Initial)

B. HAMEL, LAUREN, G., ,

Mailing Address 2425 KING ST

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1797:
Amount of Each Disbursement this Period
[] 379.51

Memo Item

Full Name (Last, First, Middle Initial)

C. HAMEL, LAUREN, G., ,

Mailing Address 2425 KING ST

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1822
Amount of Each Disbursement this Period
[] 379.50

Memo Item

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

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

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						1	6	0	7.46

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. HAMEL, LAUREN, G., ,		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017	
Mailing Address 2425 KING ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1838 Amount of Each Disbursement this Period 922.00	
City ALEXANDRIA	State VA	Zip Code 22301	Category/ Type
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. HAMEL, LAUREN, G., ,		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address 2425 KING ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I18631 Amount of Each Disbursement this Period 921.99	
City ALEXANDRIA	State VA	Zip Code 22301	Category/ Type
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. HAMEL, LAUREN, G., ,		Date of Disbursement MM / DD / YYYY 06 / 14 / 2017	
Mailing Address 2425 KING ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1904 Amount of Each Disbursement this Period 921.99	
City ALEXANDRIA	State VA	Zip Code 22301	Category/ Type
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	2765.98
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. BULLFEATHERS

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2017

Mailing Address 410 1ST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I1791f
Amount of Each Disbursement this Period: 68.32

Memo Item

Full Name (Last, First, Middle Initial)
B. HAWK N DOVE

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2017

Mailing Address 329 PENNSYLVANIA AVE. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I1791f
Amount of Each Disbursement this Period: 154.00

Memo Item

Full Name (Last, First, Middle Initial)
C. JOE'S SEAFOOD PRIME STEAK & STONE CRAB

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2017

Mailing Address 750 15TH ST NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement JFC MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I1791f
Amount of Each Disbursement this Period: 149.68

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1797'
Amount of Each Disbursement this Period
[Redacted] 1142.15

Memo Item

Full Name (Last, First, Middle Initial)

B. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I18227
Amount of Each Disbursement this Period
[Redacted] 1142.16

Memo Item

Full Name (Last, First, Middle Initial)

C. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1838
Amount of Each Disbursement this Period
[Redacted] 1808.06

Memo Item

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

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

4	0	9	2	.	3	7
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. KASTAN, JACOB, , ,		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address 1100 FIRST ST SE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1863I Amount of Each Disbursement this Period [REDACTED] 1808.06	
City WASHINGTON	State DC	Zip Code 20003-2307	Category/ Type [REDACTED]
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. KASTAN, JACOB, , ,		Date of Disbursement MM / DD / YYYY 06 / 01 / 2017	
Mailing Address 1100 FIRST ST SE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1870I Amount of Each Disbursement this Period [REDACTED] 925.39	
City WASHINGTON	State DC	Zip Code 20003-2307	Category/ Type [REDACTED]
Purpose of Disbursement SEE MEMO ENTRIES BELOW		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 01 / 2017	
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1870I Amount of Each Disbursement this Period [REDACTED] 177.20	
City FORT WORTH	State TX	Zip Code 76155	Category/ Type [REDACTED]
Purpose of Disbursement JFC TRAVEL EXPENSE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2733.45
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 50 MASSACHUSETTS AVE.

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
JFC TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I1870f
Amount of Each Disbursement this Period
180.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LOTTE NEW YORK PALACE

Mailing Address 455 MADISON AVE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
JFC TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I1870f
Amount of Each Disbursement this Period
377.23

Memo Item

Full Name (Last, First, Middle Initial)

C. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City WASHINGTON State DC Zip Code 20003-2307

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I1904
Amount of Each Disbursement this Period
1808.06

Memo Item

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

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

1808.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1919'
Amount of Each Disbursement this Period
[Redacted] 1808.05

Memo Item

Full Name (Last, First, Middle Initial)

B. MCDONALD, OLIVIA, M, ,

Mailing Address 1407 CORCORAN ST NW

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1797C
Amount of Each Disbursement this Period
[Redacted] 249.01

Memo Item

Full Name (Last, First, Middle Initial)

C. MCDONALD, OLIVIA, M, ,

Mailing Address 1407 CORCORAN ST NW

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1822
Amount of Each Disbursement this Period
[Redacted] 249.00

Memo Item

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

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

2	3	0	6	.	0	6
---	---	---	---	---	---	---

2	3	0	6	.	0	6
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. MCDONALD, OLIVIA, M, ,		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017	
Mailing Address 1407 CORCORAN ST NW		FEC Identification Number C [] Transaction ID : SB21B.I1839 Amount of Each Disbursement this Period [] 848.44	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type []
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. MCDONALD, OLIVIA, M, ,		Date of Disbursement MM / DD / YYYY 05 / 18 / 2017	
Mailing Address 1407 CORCORAN ST NW		FEC Identification Number C [] Transaction ID : SB21B.I18402 Amount of Each Disbursement this Period [] 87.80	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type []
Purpose of Disbursement JFC EXPENSES (NO ITEMIZATION NECESSARY)		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. MCDONALD, OLIVIA, M, ,		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address 1407 CORCORAN ST NW		FEC Identification Number C [] Transaction ID : SB21B.I1862 Amount of Each Disbursement this Period [] 848.45	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type []
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1784.69
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MCDONALD, OLIVIA, M, ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2017

Mailing Address 1407 CORCORAN ST NW

City
WASHINGTON

State
DC

Zip Code
20009

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1904I
Amount of Each Disbursement this Period

[REDACTED] 848.44

Memo Item

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. MCDONALD, OLIVIA, M, ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		29		2017

Mailing Address 1407 CORCORAN ST NW

City
WASHINGTON

State
DC

Zip Code
20009

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1919C
Amount of Each Disbursement this Period

[REDACTED] 848.45

Memo Item

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. MERRICK, DAVID, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		11		2017

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1791
Amount of Each Disbursement this Period

[REDACTED] 284.98

Memo Item

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

[REDACTED] 1981.87

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. AMAZON.COM

Mailing Address 410 TERRY AVE. N

City
SEATTLE

State
WA

Zip Code
98109

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1791
Amount of Each Disbursement this Period
[] 194.02

Memo Item

Full Name (Last, First, Middle Initial)

B. BULLFEATHERS

Mailing Address 410 1ST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC MEETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1791
Amount of Each Disbursement this Period
[] 34.68

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 182 HOWARD ST #8

City
SAN FRANCISCO

State
CA

Zip Code
94105

Purpose of Disbursement
JFC TRANSPORTATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1791
Amount of Each Disbursement this Period
[] 20.87

Memo Item

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

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

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						0	0	0	0

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. MERRICK, DAVID, , ,		Date of Disbursement MM / DD / YYYY 04 / 13 / 2017	
Mailing Address 1819 E CAPITOL ST SE APT 301		FEC Identification Number C [] Transaction ID : SB21B.I1796! Amount of Each Disbursement this Period [] 107.52	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type []
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MERRICK, DAVID, , ,		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017	
Mailing Address 1819 E CAPITOL ST SE APT 301		FEC Identification Number C [] Transaction ID : SB21B.I1822! Amount of Each Disbursement this Period [] 107.52	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type []
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MERRICK, DAVID, , ,		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017	
Mailing Address 1819 E CAPITOL ST SE APT 301		FEC Identification Number C [] Transaction ID : SB21B.I1839 Amount of Each Disbursement this Period [] 577.25	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type []
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 792.29
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERRICK, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1819 E CAPITOL ST SE APT 301

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 22 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1857f

Amount of Each Disbursement this Period: 378.66

Memo Item

B. AVIS RENT A CAR

Full Name (Last, First, Middle Initial)

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement JFC CAR RENTAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 22 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1858c

Amount of Each Disbursement this Period: 250.17

Memo Item

C. UBER

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD ST #8

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement JFC TRANSPORTATION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 22 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1857

Amount of Each Disbursement this Period: 23.69

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 378.66

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MERRICK, DAVID, , ,

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1862I

Amount of Each Disbursement this Period

577.26

Memo Item

Full Name (Last, First, Middle Initial)

B. MERRICK, DAVID, , ,

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1904I

Amount of Each Disbursement this Period

577.25

Memo Item

Full Name (Last, First, Middle Initial)

C. MERRICK, DAVID, , ,

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1918I

Amount of Each Disbursement this Period

577.26

Memo Item

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

1731.77

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. PLAUT, BRIAN, , ,

Mailing Address 520 12TH ST S APT 2112

City
ARLINGTON

State
VA

Zip Code
22202

Purpose of Disbursement
SEE MEMO ENTRY BELOW

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	7	7	0

FEC Identification Number

C

Transaction ID : SB21B.I1770
Amount of Each Disbursement this Period

442.20

Memo Item

Full Name (Last, First, Middle Initial)

B. HERTZ CAR RENTAL

Mailing Address 14501 HERTZ QUAIL SPRINGS PKWY

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
JFC CAR RENTAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	7	7	0

FEC Identification Number

C

Transaction ID : SB21B.I1770
Amount of Each Disbursement this Period

298.31

Memo Item

Full Name (Last, First, Middle Initial)

C. PLAUT, BRIAN, , ,

Mailing Address 520 12TH ST S APT 2112

City
ARLINGTON

State
VA

Zip Code
22202

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	3			2	0	1	7	7	0

FEC Identification Number

C

Transaction ID : SB21B.I1796
Amount of Each Disbursement this Period

675.64

Memo Item

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

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

1117.84

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. PLAUT, BRIAN, , ,

Date of Disbursement
MM / DD / YYYY
04 / 27 / 2017

Mailing Address 520 12TH ST S APT 2112

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Transaction ID : SB21B.I1822

Amount of Each Disbursement this Period
675.63

Memo Item

Full Name (Last, First, Middle Initial)
B. PLAUT, BRIAN, , ,

Date of Disbursement
MM / DD / YYYY
05 / 15 / 2017

Mailing Address 520 12TH ST S APT 2112

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Transaction ID : SB21B.I18392

Amount of Each Disbursement this Period
675.62

Memo Item

Full Name (Last, First, Middle Initial)
C. PLAUT, BRIAN, , ,

Date of Disbursement
MM / DD / YYYY
05 / 30 / 2017

Mailing Address 520 12TH ST S APT 2112

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Transaction ID : SB21B.I1862

Amount of Each Disbursement this Period
675.64

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2026.89

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. PLAUT, BRIAN, , ,

Mailing Address 520 12TH ST S APT 2112

City
ARLINGTON

State
VA

Zip Code
22202

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1905I

Amount of Each Disbursement this Period

675.63

Memo Item

Full Name (Last, First, Middle Initial)

B. PLAUT, BRIAN, , ,

Mailing Address 520 12TH ST S APT 2112

City
ARLINGTON

State
VA

Zip Code
22202

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1918I

Amount of Each Disbursement this Period

675.62

Memo Item

Full Name (Last, First, Middle Initial)

C. POLLOCK, SAMANTHA, , ,

Mailing Address 211 S FIFTH ST

City
COLUMBUS

State
OH

Zip Code
43215

Purpose of Disbursement
SEE MEMO ENTRY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1819I

Amount of Each Disbursement this Period

294.00

Memo Item

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

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

1645.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 441 2ND ST SW

City
WASHINGTON

State
DC

Zip Code
20515

Purpose of Disbursement
JFC POSTAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1820I

Amount of Each Disbursement this Period

[REDACTED] 294.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RODAY, ZACK , M , ,

Mailing Address 536 COLECRAFT CT

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1792I

Amount of Each Disbursement this Period

[REDACTED] 60.57

Memo Item

Full Name (Last, First, Middle Initial)

C. BULLFEATHERS

Mailing Address 410 1ST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC MEETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1792I

Amount of Each Disbursement this Period

[REDACTED] 60.57

Memo Item

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

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

[REDACTED] 60.57

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. RODAY, ZACK, M, ,		Date of Disbursement MM / DD / YYYY 04 / 13 / 2017	
Mailing Address 536 COLECRAFT CT		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1796; Amount of Each Disbursement this Period [REDACTED] 368.75	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type [REDACTED]
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. RODAY, ZACK, M, ,		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017	
Mailing Address 536 COLECRAFT CT		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1822; Amount of Each Disbursement this Period [REDACTED] 368.74	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type [REDACTED]
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. RODAY, ZACK, M, ,		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017	
Mailing Address 536 COLECRAFT CT		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1839 Amount of Each Disbursement this Period [REDACTED] 4704.81	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type [REDACTED]
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 5442.30
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RODAY, ZACK , M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 536 COLECRAFT CT

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1862I

Amount of Each Disbursement this Period: 1476.84

Memo Item

B. RODAY, ZACK , M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 536 COLECRAFT CT

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1905I

Amount of Each Disbursement this Period: 1476.84

Memo Item

C. RODAY, ZACK , M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 536 COLECRAFT CT

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 29 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1918I

Amount of Each Disbursement this Period: 1476.85

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4430.53

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEIFERT, KEVIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement SEE MEMO ENTRY BELOW

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1774

Amount of Each Disbursement this Period: 409.89

Memo Item

B. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC EVENT CATERING

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1774

Amount of Each Disbursement this Period: 409.89

Memo Item

C. SEIFERT, KEVIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1796

Amount of Each Disbursement this Period: 874.61

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1284.50

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1823
Amount of Each Disbursement this Period
[] 874.62

Memo Item

Full Name (Last, First, Middle Initial)

B. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1825
Amount of Each Disbursement this Period
[] 346.73

Memo Item

Full Name (Last, First, Middle Initial)

C. HANK'S OYSTER BAR

Mailing Address 1624 Q ST NW

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC MEETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1826
Amount of Each Disbursement this Period
[] 237.90

Memo Item

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

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

[] 1221.35

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. TORTILLA COAST

Mailing Address 400 FIRST STREET NE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1826

Amount of Each Disbursement this Period: 54.55

Memo Item

Full Name (Last, First, Middle Initial)
B. UBER

Mailing Address 182 HOWARD ST #8

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement JFC TRANSPORTATION

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1825

Amount of Each Disbursement this Period: 20.33

Memo Item

Full Name (Last, First, Middle Initial)
C. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1839

Amount of Each Disbursement this Period: 1702.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1702.93

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEIFERT, KEVIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement SEE MEMO ENTRY BELOW

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1873!

Amount of Each Disbursement this Period: 129.15

Memo Item

B. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1874C

Amount of Each Disbursement this Period: 129.15

Memo Item

C. SEIFERT, KEVIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1905

Amount of Each Disbursement this Period: 1702.94

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1832.09

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1918f
Amount of Each Disbursement this Period
[Redacted] 1702.92

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1792f
Amount of Each Disbursement this Period
[Redacted] 94.69

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1796
Amount of Each Disbursement this Period
[Redacted] 1964.24

Memo Item

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

3	7	6	1	.	8	5
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TOTAL This Period (last page this line number only)..... ▶

3	7	6	1	.	8	5
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP BLVD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 21 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1820

Amount of Each Disbursement this Period: 108.69

Memo Item

B. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP BLVD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement JFC TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1822

Amount of Each Disbursement this Period: 1964.26

Memo Item

C. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP BLVD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1833

Amount of Each Disbursement this Period: 94.69

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2167.64

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017	
Mailing Address 1 ADP BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1838 Amount of Each Disbursement this Period 7181.25	
City ROSELAND	State NJ	Zip Code 07068	Category/ Type
Purpose of Disbursement JFC TAXES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement MM / DD / YYYY 05 / 19 / 2017	
Mailing Address 1 ADP BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1856 Amount of Each Disbursement this Period 108.69	
City ROSELAND	State NJ	Zip Code 07068	Category/ Type
Purpose of Disbursement JFC PAYROLL EXPENSE			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address 1 ADP BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1862 Amount of Each Disbursement this Period 4486.71	
City ROSELAND	State NJ	Zip Code 07068	Category/ Type
Purpose of Disbursement JFC TAXES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	11776.65
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1876I
Amount of Each Disbursement this Period
[] 94.69

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1905I
Amount of Each Disbursement this Period
[] 4484.42

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1916I
Amount of Each Disbursement this Period
[] 94.69

Memo Item

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

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

[] 4673.80

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP BLVD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement JFC TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 29 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1918!

Amount of Each Disbursement this Period: 4461.32

Memo Item

B. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP BLVD

City ROSELAND State NJ Zip Code 07068

Purpose of Disbursement JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1921!

Amount of Each Disbursement this Period: 14.00

Memo Item

C. AMERICAN BEVERAGE ASSOCIATION

Full Name (Last, First, Middle Initial)

Mailing Address 1275 PENNSYLVANIA AVE NW STE 1100

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement JFC EVENT FACILITY FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1917

Amount of Each Disbursement this Period: 225.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4700.32

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1774I

Amount of Each Disbursement this Period: 391.20

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1774I

Amount of Each Disbursement this Period: 97.80

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 04 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1774I

Amount of Each Disbursement this Period: 117.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 606.25

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1790
Amount of Each Disbursement this Period

[REDACTED] 5414.69

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1791C
Amount of Each Disbursement this Period

[REDACTED] 3500.30

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1792
Amount of Each Disbursement this Period

[REDACTED] 26.20

Memo Item

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

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

[REDACTED] 8941.19

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1793

Amount of Each Disbursement this Period: 868.25

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1794

Amount of Each Disbursement this Period: 195.60

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1797

Amount of Each Disbursement this Period: 101.33

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1165.18

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1797!

Amount of Each Disbursement this Period

544.79

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1798!

Amount of Each Disbursement this Period

97.80

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1798!

Amount of Each Disbursement this Period

97.80

Memo Item

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

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

740.39

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1798;
Amount of Each Disbursement this Period

[REDACTED] 195.60

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I18174
Amount of Each Disbursement this Period

[REDACTED] 3111.80

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1821
Amount of Each Disbursement this Period

[REDACTED] 97.80

Memo Item

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

[REDACTED] 3405.20

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1821!

Amount of Each Disbursement this Period: 2184.45

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1823!

Amount of Each Disbursement this Period: 496.38

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1826

Amount of Each Disbursement this Period: 97.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2778.63

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1832I

Amount of Each Disbursement this Period

[REDACTED] 4428.90

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1833I

Amount of Each Disbursement this Period

[REDACTED] 156.60

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1834I

Amount of Each Disbursement this Period

[REDACTED] 2867.90

Memo Item

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

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

[REDACTED] 7453.40

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 09 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I18381

Amount of Each Disbursement this Period: 1769.46

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 10 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I18381

Amount of Each Disbursement this Period: 124.60

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I18381

Amount of Each Disbursement this Period: 3601.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5495.76

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017	
Mailing Address 3RD STREET		FEC Identification Number C [] Transaction ID : SB21B.I1838 Amount of Each Disbursement this Period [] 1857.40	
City BATON ROUGE	State LA	Zip Code 70801	Category/ Type []
Purpose of Disbursement JFC CC TRANSACTION FEES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 05 / 18 / 2017	
Mailing Address 3RD STREET		FEC Identification Number C [] Transaction ID : SB21B.I1857C Amount of Each Disbursement this Period [] 11.54	
City BATON ROUGE	State LA	Zip Code 70801	Category/ Type []
Purpose of Disbursement JFC CC TRANSACTION FEES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement MM / DD / YYYY 05 / 19 / 2017	
Mailing Address 3RD STREET		FEC Identification Number C [] Transaction ID : SB21B.I1857 Amount of Each Disbursement this Period [] 0.69	
City BATON ROUGE	State LA	Zip Code 70801	Category/ Type []
Purpose of Disbursement JFC CC TRANSACTION FEES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1869.63
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 22 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1858

Amount of Each Disbursement this Period: 6811.40

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 23 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I18587

Amount of Each Disbursement this Period: 6.28

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1861

Amount of Each Disbursement this Period: 3233.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10051.58

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I18614

Amount of Each Disbursement this Period: 390.30

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 26 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I18618

Amount of Each Disbursement this Period: 488.10

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1870

Amount of Each Disbursement this Period: 204.42

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1082.82

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. ANEDOT

Date of Disbursement: MM / DD / YYYY
05 / 31 / 2017

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I1872!
Amount of Each Disbursement this Period: 47.40

Memo Item

Full Name (Last, First, Middle Initial)
B. ANEDOT

Date of Disbursement: MM / DD / YYYY
06 / 02 / 2017

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I1873!
Amount of Each Disbursement this Period: 15.00

Memo Item

Full Name (Last, First, Middle Initial)
C. ANEDOT

Date of Disbursement: MM / DD / YYYY
06 / 02 / 2017

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I1873!
Amount of Each Disbursement this Period: 745.07

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 807.47

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1875'

Amount of Each Disbursement this Period: 4080.10

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 12 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I18763

Amount of Each Disbursement this Period: 1508.07

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 14 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1908

Amount of Each Disbursement this Period: 98.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5686.47

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1910!

Amount of Each Disbursement this Period: 83.21

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1914!

Amount of Each Disbursement this Period: 2450.60

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 19 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1914!

Amount of Each Disbursement this Period: 131.41

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2665.22

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1915'
Amount of Each Disbursement this Period
[] 407.07

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I19154
Amount of Each Disbursement this Period
[] 200.39

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1916
Amount of Each Disbursement this Period
[] 18.12

Memo Item

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

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

6	2	5	.	5	8
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. ANEDOT

Date of Disbursement: MM / DD / YYYY
06 / 22 / 2017

Mailing Address 3RD STREET

City: BATON ROUGE State: LA Zip Code: 70801

Purpose of Disbursement: JFC CC TRANSACTION FEES

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate Other (specify) ▼
 President

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB21B.I1916!
Amount of Each Disbursement this Period: _____
381.17

Memo Item

Full Name (Last, First, Middle Initial)
B. ANEDOT

Date of Disbursement: MM / DD / YYYY
06 / 26 / 2017

Mailing Address 3RD STREET

City: BATON ROUGE State: LA Zip Code: 70801

Purpose of Disbursement: JFC CC TRANSACTION FEES

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate Other (specify) ▼
 President

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB21B.I1917!
Amount of Each Disbursement this Period: _____
875.30

Memo Item

Full Name (Last, First, Middle Initial)
C. ANEDOT

Date of Disbursement: MM / DD / YYYY
06 / 27 / 2017

Mailing Address 3RD STREET

City: BATON ROUGE State: LA Zip Code: 70801

Purpose of Disbursement: JFC CC TRANSACTION FEES

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate Other (specify) ▼
 President

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB21B.I1918
Amount of Each Disbursement this Period: _____
11.49

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1267.96

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017	
Mailing Address 3RD STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1919; Amount of Each Disbursement this Period 1661.09	
City BATON ROUGE	State LA	Zip Code 70801	Category/ Type
Purpose of Disbursement JFC CC TRANSACTION FEES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 3RD STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1922C Amount of Each Disbursement this Period 112.05	
City BATON ROUGE	State LA	Zip Code 70801	Category/ Type
Purpose of Disbursement JFC CC TRANSACTION FEES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ASPECT CONSULTING		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017	
Mailing Address 8401 EXCELSIOR DR STE 103		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1772 Amount of Each Disbursement this Period 2693.50	
City MADISON	State WI	Zip Code 53717	Category/ Type
Purpose of Disbursement JFC DIRECT MAIL CAGING			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	4466.64
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ASPECT CONSULTING

Mailing Address 8401 EXCELSIOR DR STE 103

City
MADISON

State
WI

Zip Code
53717

Purpose of Disbursement
JFC DIRECT MAIL CAGING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1833I

Amount of Each Disbursement this Period

[REDACTED] 785.62

Memo Item

Full Name (Last, First, Middle Initial)

B. ASPECT CONSULTING

Mailing Address 8401 EXCELSIOR DR STE 103

City
MADISON

State
WI

Zip Code
53717

Purpose of Disbursement
JFC DIRECT MAIL CAGING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		06		2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1873I

Amount of Each Disbursement this Period

[REDACTED] 1154.63

Memo Item

Full Name (Last, First, Middle Initial)

C. BGR GOVERNMENT AFFAIRS LLC

Mailing Address PO BOX 14416

City
WASHINGTON

State
DC

Zip Code
20044

Purpose of Disbursement
JFC EVENT FACILITY FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		30		2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1863I

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

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

[REDACTED] 2190.25

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CAMPAIGN CAPITAL GROUP, LLC

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1792!
Amount of Each Disbursement this Period

[REDACTED] 200000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN CAPITAL GROUP, LLC

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I18722
Amount of Each Disbursement this Period

[REDACTED] 150000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN CAPITAL GROUP, LLC

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1914
Amount of Each Disbursement this Period

[REDACTED] 250000.00

Memo Item

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

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

[REDACTED] 600000.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement JFC SOFTWARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1793

Amount of Each Disbursement this Period: 1928.59

Memo Item

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement JFC SOFTWARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 04 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I18332

Amount of Each Disbursement this Period: 1942.36

Memo Item

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement JFC SOFTWARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1873

Amount of Each Disbursement this Period: 1945.07

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5816.02

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	26	<input type="checkbox"/>	27
<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HOLTZMAN VOGEL JOSEFIK PLLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	7

Mailing Address 45 NORTH HILL DRIVE
STE. 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
JFC LEGAL SERVICES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1875I
Amount of Each Disbursement this Period

[REDACTED] 5000.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. HOLTZMAN VOGEL JOSEFIK PLLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	7

Mailing Address 45 NORTH HILL DRIVE
STE. 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
JFC LEGAL SERVICES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I19147
Amount of Each Disbursement this Period

[REDACTED] 5000.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. INTUIT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	7

Mailing Address 2632 MARINE WAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
JFC SOFTWARE

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1792
Amount of Each Disbursement this Period

[REDACTED] 36.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] 10036.00

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2632 MARINE WAY

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

Purpose of Disbursement
JFC SOFTWARE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I1833
Amount of Each Disbursement this Period
36.00

Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2632 MARINE WAY

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

Purpose of Disbursement
JFC SOFTWARE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I18732
Amount of Each Disbursement this Period
36.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS CT

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
JFC SOFTWARE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I1775
Amount of Each Disbursement this Period
209.96

Memo Item

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

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

281.96

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS CT

City BROOKFIELD State WI Zip Code 53005

Purpose of Disbursement JFC SOFTWARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1832

Amount of Each Disbursement this Period: 101.78

Memo Item

Full Name (Last, First, Middle Initial)
B. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS CT

City BROOKFIELD State WI Zip Code 53005

Purpose of Disbursement JFC SOFTWARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1873

Amount of Each Disbursement this Period: 129.19

Memo Item

Full Name (Last, First, Middle Initial)
C. LCC, INC.

Mailing Address 1125 PARK WEST DR

City CHARLOTTE State NC Zip Code 28209

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1871

Amount of Each Disbursement this Period: 8000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8230.97

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. LCC, INC.

Date of Disbursement: MM / DD / YYYY
06 / 26 / 2017

Mailing Address 1125 PARK WEST DR

City CHARLOTTE State NC Zip Code 28209

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB21B.I1917I
Amount of Each Disbursement this Period
4000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. MIKE MCGINNIS PHOTOGRAPHY

Date of Disbursement: MM / DD / YYYY
05 / 26 / 2017

Mailing Address 3635 S RIVERSHIRE DR #3

City GREENFIELD State WI Zip Code 53228

Purpose of Disbursement JFC PHOTOGRAPHY

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB21B.I1861I
Amount of Each Disbursement this Period
310.00

Memo Item

Full Name (Last, First, Middle Initial)
C. PROFESSIONAL DATA SERVICES

Date of Disbursement: MM / DD / YYYY
04 / 20 / 2017

Mailing Address 824 S MILLEDGE AVE STE. 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement JFC COMPLIANCE SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB21B.I1817
Amount of Each Disbursement this Period
6032.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10342.20

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE. 101

City
ATHENS

State
GA

Zip Code
30605

Purpose of Disbursement
JFC COMPLIANCE SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1860:
Amount of Each Disbursement this Period
[] 6069.79

Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE. 101

City
ATHENS

State
GA

Zip Code
30605

Purpose of Disbursement
JFC COMPLIANCE SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I19175:
Amount of Each Disbursement this Period
[] 6017.48

Memo Item

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1770:
Amount of Each Disbursement this Period
[] 23166.00

Memo Item

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

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

3	5	2	5	3	.	2	7
---	---	---	---	---	---	---	---

--	--	--	--	--	--	--	--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONS

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1837
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. RED CURVE SOLUTIONS

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1872C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. SCM ASSOCIATES

Mailing Address 1283 MAIN ST

City
DUBLIN

State
NH

Zip Code
34448-0254

Purpose of Disbursement
JFC DIRECT MARKETING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1792
Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SCM ASSOCIATES

Mailing Address 1283 MAIN ST

City
DUBLIN

State
NH

Zip Code
34448-0254

Purpose of Disbursement
JFC DIRECT MARKETING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1834
Amount of Each Disbursement this Period
[] 1744.94

Memo Item

Full Name (Last, First, Middle Initial)

B. SCM ASSOCIATES

Mailing Address 1283 MAIN ST

City
DUBLIN

State
NH

Zip Code
34448-0254

Purpose of Disbursement
JFC DIRECT MARKETING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I18741
Amount of Each Disbursement this Period
[] 13308.80

Memo Item

Full Name (Last, First, Middle Initial)

C. SCM ASSOCIATES

Mailing Address 1283 MAIN ST

City
DUBLIN

State
NH

Zip Code
34448-0254

Purpose of Disbursement
JFC DIRECT MARKETING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1915
Amount of Each Disbursement this Period
[] 2120.32

Memo Item

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

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

1	7	1	7	4	.	0	6
---	---	---	---	---	---	---	---

--	--	--	--	--	--	--	--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. SCM ASSOCIATES		Date of Disbursement MM / DD / YYYY 06 / 27 / 2017
Mailing Address 1283 MAIN ST		FEC Identification Number C Transaction ID : SB21B.I1917f Amount of Each Disbursement this Period 1626.80
City DUBLIN	State NH	
Zip Code 34448-0254		Memo Item <input type="checkbox"/>
Purpose of Disbursement JFC DIRECT MARKETING		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. STRATEGIC ADVANCE SERVICES		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address 611 PENNSYLVANIA AVE SE #267		FEC Identification Number C Transaction ID : SB21B.I1771f Amount of Each Disbursement this Period 195972.56
City WASHINGTON	State DC	
Zip Code 20003		Memo Item <input type="checkbox"/>
Purpose of Disbursement JFC ADVANCE, EVENT AND TRAVEL SERVICES		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. STRATEGIC ADVANCE SERVICES		Date of Disbursement MM / DD / YYYY 04 / 17 / 2017
Mailing Address 611 PENNSYLVANIA AVE SE #267		FEC Identification Number C Transaction ID : SB21B.I1798 Amount of Each Disbursement this Period 142528.17
City WASHINGTON	State DC	
Zip Code 20003		Memo Item <input type="checkbox"/>
Purpose of Disbursement JFC TRAVEL & EVENT SERVICES		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	340127.53
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC ADVANCE, EVENT & TRAVEL SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1826
Amount of Each Disbursement this Period

[REDACTED] 22223.65

Memo Item

Full Name (Last, First, Middle Initial)

B. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC TRAVEL & EVENT SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1840
Amount of Each Disbursement this Period

[REDACTED] 18890.55

Memo Item

Full Name (Last, First, Middle Initial)

C. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC ADVANCE, TRAVEL & EVENT SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1874
Amount of Each Disbursement this Period

[REDACTED] 91669.68

Memo Item

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

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

[REDACTED] 502883.88

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC TRAVEL & EVENT SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1914
 Amount of Each Disbursement this Period
 [] 168695.79

Memo Item

Full Name (Last, First, Middle Initial)

B. SUNTRUST BANK CREDIT CARD

Mailing Address PO BOX 4928

City
ORLANDO

State
FL

Zip Code
32802-4928

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1793
 Amount of Each Disbursement this Period
 [] 8198.32

Memo Item

Full Name (Last, First, Middle Initial)

C. 4IMPRINT

Mailing Address 101 COMMERCE ST

City
OSHKOSH

State
WI

Zip Code
54901

Purpose of Disbursement
JFC CUSTOM PRINTED ITEMS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1793
 Amount of Each Disbursement this Period
 [] 519.90

Memo Item

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

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

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						1	7	6	8

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. AMAZON.COM

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2017

Mailing Address 410 TERRY AVE. N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

FEC Identification Number
C

Transaction ID : **SB21B.I1793**

Amount of Each Disbursement this Period
378.77

Memo Item

Full Name (Last, First, Middle Initial)
B. AMERICAN AIRLINES

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2017

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement JFC AIRFARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

FEC Identification Number
C

Transaction ID : **SB21B.I1793**

Amount of Each Disbursement this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. BERNAISE

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2017

Mailing Address 315 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

FEC Identification Number
C

Transaction ID : **SB21B.I1793**

Amount of Each Disbursement this Period
260.88

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BJ'S RESTAURANTS

Full Name (Last, First, Middle Initial)

Mailing Address 7755 CENTER AVE

City HUNTINGTON BEACH State CA Zip Code 92647

Purpose of Disbursement JFC MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I17941

Amount of Each Disbursement this Period: 271.18

Memo Item

B. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC EVENT CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I17941

Amount of Each Disbursement this Period: 1763.13

Memo Item

C. DOUBLETREE HOTEL

Full Name (Last, First, Middle Initial)

Mailing Address 350 1ST AVE. NE

City CEDAR RAPIDS State IA Zip Code 52401

Purpose of Disbursement JFC LODGING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I17941

Amount of Each Disbursement this Period: 1460.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 3640 HACKS CROSS RD

City
MEMPHIS

State
TN

Zip Code
38125

Purpose of Disbursement
JFC PRINTING & SHIPPING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I1794
Amount of Each Disbursement this Period
1965.43

Memo Item

Full Name (Last, First, Middle Initial)

B. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE STE 5000

City
ATLANTA

State
GA

Zip Code
30308

Purpose of Disbursement
JFC EMAIL BLAST

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I1794
Amount of Each Disbursement this Period
75.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 2900 DEERFIELD DRIVE
SUITE 5

City
JANESVILLE

State
WI

Zip Code
53546-3454

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I1794
Amount of Each Disbursement this Period
891.06

Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. SUNTRUST BANK		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017	
Mailing Address P.O. BOX 4418		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1820 Amount of Each Disbursement this Period [REDACTED] 264.80	
City ATLANTA	State GA	Zip Code 30302	Category/ Type [REDACTED]
Purpose of Disbursement JFC BANK FEE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. SUNTRUST BANK		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017	
Mailing Address P.O. BOX 4418		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I18254 Amount of Each Disbursement this Period [REDACTED] 48.50	
City ATLANTA	State GA	Zip Code 30302	Category/ Type [REDACTED]
Purpose of Disbursement JFC BANK FEE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. SUNTRUST BANK		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017	
Mailing Address P.O. BOX 4418		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1840 Amount of Each Disbursement this Period [REDACTED] 12.50	
City ATLANTA	State GA	Zip Code 30302	Category/ Type [REDACTED]
Purpose of Disbursement JFC BANK FEE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 325.80
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK CREDIT CARD

Mailing Address PO BOX 4928

City
ORLANDO

State
FL

Zip Code
32802-4928

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1840!

Amount of Each Disbursement this Period

6068.79

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTH

State
TX

Zip Code
76155

Purpose of Disbursement
JFC AIRFARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I18411

Amount of Each Disbursement this Period

450.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AVIS RENT A CAR

Mailing Address 6 SYLVAN WAY

City
PARSIPPANY

State
NJ

Zip Code
07054

Purpose of Disbursement
JFC CAR RENTAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1841

Amount of Each Disbursement this Period

627.82

Memo Item

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

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

6068.79

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC EVENT CATERING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1841
Amount of Each Disbursement this Period
[] 1323.40 []

Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 3640 HACKS CROSS RD

City
MEMPHIS

State
TN

Zip Code
38125

Purpose of Disbursement
JFC PRINTING & SHIPPING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1841
Amount of Each Disbursement this Period
[] 1883.47 []

Memo Item

Full Name (Last, First, Middle Initial)

C. JETTIES MACOMB

Mailing Address 3708 MACOMB ST NW,

City
WASHINNGTON

State
DC

Zip Code
20016

Purpose of Disbursement
JFC MEETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1841
Amount of Each Disbursement this Period
[] 247.07 []

Memo Item

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

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

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						0	.	00	

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAILCHIMP

Full Name (Last, First, Middle Initial)

Mailing Address 675 PONCE DE LEON AVE NE STE 5000

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement JFC EMAIL BLAST

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 18 / 2017

FEC Identification Number C

Transaction ID : SB21B.I18411

Amount of Each Disbursement this Period 75.00

Memo Item

B. STAPLES

Full Name (Last, First, Middle Initial)

Mailing Address 500 STAPLES DR

City FRAMINGHAM State MA Zip Code 17024

Purpose of Disbursement JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 18 / 2017

FEC Identification Number C

Transaction ID : SB21B.I18411

Amount of Each Disbursement this Period 565.91

Memo Item

C. STARBRIGHT FLORAL DESIGN

Full Name (Last, First, Middle Initial)

Mailing Address 140 W 26TH ST

City NEW YORK State NY Zip Code 10001

Purpose of Disbursement JFC EVENT SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 18 / 2017

FEC Identification Number C

Transaction ID : SB21B.I18411

Amount of Each Disbursement this Period 119.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. YIPPEE-EI-O! STEAKHOUSE

Mailing Address 541 AZ-64

City
GRAND CANYON VILLA

State
AZ

Zip Code
86023

Purpose of Disbursement
JFC MEETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1841!

Amount of Each Disbursement this Period

[REDACTED] 239.49

Memo Item

Full Name (Last, First, Middle Initial)

B. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1856!

Amount of Each Disbursement this Period

[REDACTED] 152.50

Memo Item

Full Name (Last, First, Middle Initial)

C. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1870

Amount of Each Disbursement this Period

[REDACTED] 144.50

Memo Item

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

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

[REDACTED] 297.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK CREDIT CARD

Mailing Address PO BOX 4928

City
ORLANDO

State
FL

Zip Code
32802-4928

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1906I

Amount of Each Disbursement this Period

4401.52

Memo Item

Full Name (Last, First, Middle Initial)

B. AMAZON.COM

Mailing Address 410 TERRY AVE. N

City
SEATTLE

State
WA

Zip Code
98109

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1908I

Amount of Each Disbursement this Period

385.87

Memo Item

Full Name (Last, First, Middle Initial)

C. EDWARDS FLORIST

Mailing Address 1353 SHERMER ROAD

City
NORTHBROOK

State
IL

Zip Code
60062

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1909I

Amount of Each Disbursement this Period

236.53

Memo Item

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

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

4401.52

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 3640 HACKS CROSS RD

City
MEMPHIS

State
TN

Zip Code
38125

Purpose of Disbursement
JFC SHIPPING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I1909
Amount of Each Disbursement this Period
775.51

Memo Item

Full Name (Last, First, Middle Initial)

B. LENOX HILL FLORIST & EVENTS

Mailing Address 1140 LEXINGTON AVE

City
NEW YORK

State
NY

Zip Code
10075

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I19101
Amount of Each Disbursement this Period
626.02

Memo Item

Full Name (Last, First, Middle Initial)

C. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE STE 5000

City
ATLANTA

State
GA

Zip Code
30308

Purpose of Disbursement
JFC EMAIL BLAST

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I1909
Amount of Each Disbursement this Period
75.00

Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 2900 DEERFIELD DRIVE
SUITE 5

City
JANESVILLE

State
WI

Zip Code
53546-3454

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1909
Amount of Each Disbursement this Period

[REDACTED] 532.86

Memo Item

Full Name (Last, First, Middle Initial)

B. TORTILLA COAST

Mailing Address 400 FIRST STREET NE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC MEETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1910
Amount of Each Disbursement this Period

[REDACTED] 88.15

Memo Item

Full Name (Last, First, Middle Initial)

C. ULTRA VIOLET FLOWERS

Mailing Address 1218 31ST ST NW

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1910
Amount of Each Disbursement this Period

[REDACTED] 106.39

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 441 2ND ST SW

City
WASHINGTON

State
DC

Zip Code
20515

Purpose of Disbursement
JFC POSTAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1910

Amount of Each Disbursement this Period

[REDACTED] 245.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WINSTON FLOWERS

Mailing Address 8 MAIN ST

City
HINGHAM

State
MA

Zip Code
02043

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1910

Amount of Each Disbursement this Period

[REDACTED] 457.31

Memo Item

Full Name (Last, First, Middle Initial)

C. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1914

Amount of Each Disbursement this Period

[REDACTED] 190.00

Memo Item

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

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

[REDACTED] 190.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. SUNTRUST BANK		Date of Disbursement MM / DD / YYYY 06 / 20 / 2017	
Mailing Address P.O. BOX 4418		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1914! Amount of Each Disbursement this Period [REDACTED] 182.00	
City ATLANTA	State GA	Zip Code 30302	Category/ Type [REDACTED]
Purpose of Disbursement JFC BANK FEE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. SUNTRUST BANK		Date of Disbursement MM / DD / YYYY 06 / 22 / 2017	
Mailing Address P.O. BOX 4418		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1916! Amount of Each Disbursement this Period [REDACTED] 12.50	
City ATLANTA	State GA	Zip Code 30302	Category/ Type [REDACTED]
Purpose of Disbursement JFC BANK FEE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. SUNTRUST BANK		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address P.O. BOX 4418		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1921 Amount of Each Disbursement this Period [REDACTED] 124.00	
City ATLANTA	State GA	Zip Code 30302	Category/ Type [REDACTED]
Purpose of Disbursement JFC BANK FEE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 318.50
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	1	7		

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1747
Amount of Each Disbursement this Period

[Redacted] 604.23

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	7		

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I17642
Amount of Each Disbursement this Period

[Redacted] 370.03

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC DIGITAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	7		

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1770
Amount of Each Disbursement this Period

[Redacted] 33947.05

Memo Item

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

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

[Redacted] 34921.31

[Redacted]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 05 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1773!

Amount of Each Disbursement this Period: 481.84

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 06 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1792!

Amount of Each Disbursement this Period: 112.66

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 07 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1793!

Amount of Each Disbursement this Period: 43.86

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 638.36

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1793'
Amount of Each Disbursement this Period
[] 160.37

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I17934
Amount of Each Disbursement this Period
[] 89.43

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.I1795
Amount of Each Disbursement this Period
[] 220.55

Memo Item

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

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

4	7	0	.	3	5
---	---	---	---	---	---

4	7	0	.	3	5
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 13 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1796
Amount of Each Disbursement this Period: 408.74

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 14 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1797
Amount of Each Disbursement this Period: 67.54

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 17 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1798
Amount of Each Disbursement this Period: 339.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 815.34

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1798

Amount of Each Disbursement this Period

117.44

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC DIGITAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1798

Amount of Each Disbursement this Period

38000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1817

Amount of Each Disbursement this Period

700.47

Memo Item

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

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

38817.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	0			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.I18171

Amount of Each Disbursement this Period

170.59

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.I18209

Amount of Each Disbursement this Period

114.70

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.I1821

Amount of Each Disbursement this Period

32.56

Memo Item

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

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

317.85

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	7		

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1821
Amount of Each Disbursement this Period

[Redacted] 125.66

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	7		

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1821
Amount of Each Disbursement this Period

[Redacted] 185.02

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	1	7		

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1823
Amount of Each Disbursement this Period

[Redacted] 256.70

Memo Item

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

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

[Redacted] 567.38

[Redacted]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 28 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1823!
Amount of Each Disbursement this Period: 708.95

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 01 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1825!
Amount of Each Disbursement this Period: 505.10

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 02 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1826!
Amount of Each Disbursement this Period: 282.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1496.95

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1826

Amount of Each Disbursement this Period

684.37

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I18265

Amount of Each Disbursement this Period

0.49

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.I1832

Amount of Each Disbursement this Period

26.33

Memo Item

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

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

711.19

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 05 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1833!
Amount of Each Disbursement this Period: 446.91

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1833!
Amount of Each Disbursement this Period: 108.66

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 10 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1839!
Amount of Each Disbursement this Period: 265.43

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 821.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I18397

Amount of Each Disbursement this Period

[REDACTED] 49.83

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I18397

Amount of Each Disbursement this Period

[REDACTED] 31.54

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I18397

Amount of Each Disbursement this Period

[REDACTED] 65.06

Memo Item

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

[REDACTED] 146.43

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1839!

Amount of Each Disbursement this Period

[REDACTED] 33.01

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1840!

Amount of Each Disbursement this Period

[REDACTED] 45.50

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC DIGITAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1840!

Amount of Each Disbursement this Period

[REDACTED] 57752.00

Memo Item

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

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

[REDACTED] 57830.51

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1857'
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1857z
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1857
Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1857

Amount of Each Disbursement this Period

[REDACTED] 145.85

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1858

Amount of Each Disbursement this Period

[REDACTED] 409.73

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1861

Amount of Each Disbursement this Period

[REDACTED] 179.42

Memo Item

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

[REDACTED] 735.00

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 26 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1861'
Amount of Each Disbursement this Period: 656.36

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 24 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I18612
Amount of Each Disbursement this Period: 399.59

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC DIGITAL CONSULTING & MARKETING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 26 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1861
Amount of Each Disbursement this Period: 57950.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 59005.95

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	7

FEC Identification Number

C Transaction ID : SB21B.I1862
Amount of Each Disbursement this Period

432.81

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	7

FEC Identification Number

C Transaction ID : SB21B.I1870
Amount of Each Disbursement this Period

1575.58

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	7

FEC Identification Number

C Transaction ID : SB21B.I1873
Amount of Each Disbursement this Period

293.63

Memo Item

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

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

2302.02

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1873'
Amount of Each Disbursement this Period: 334.23

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 06 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1873'
Amount of Each Disbursement this Period: 87.12

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 02 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1874
Amount of Each Disbursement this Period: 411.86

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 833.21

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1875I
Amount of Each Disbursement this Period: 139.59

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 09 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1876I
Amount of Each Disbursement this Period: 44.88

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 12 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1876I
Amount of Each Disbursement this Period: 152.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 336.47

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1876
Amount of Each Disbursement this Period: 53.05

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1876
Amount of Each Disbursement this Period: 38035.91

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 14 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1904
Amount of Each Disbursement this Period: 270.23

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 38359.19

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 15 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1905f
Amount of Each Disbursement this Period: 111.61

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 16 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1912f
Amount of Each Disbursement this Period: 91.08

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 19 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1914
Amount of Each Disbursement this Period: 42.21

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 244.90

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 20 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1914I
Amount of Each Disbursement this Period: 90.39

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 21 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1915I
Amount of Each Disbursement this Period: 431.92

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 22 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1915I
Amount of Each Disbursement this Period: 154.62

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 676.93

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)

Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 22 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1916

Amount of Each Disbursement this Period: 57950.00

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)

Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 23 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1916

Amount of Each Disbursement this Period: 160.86

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)

Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 26 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I1916

Amount of Each Disbursement this Period: 62.28

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 58173.14

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1917'
Amount of Each Disbursement this Period

[REDACTED] 37.77

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1918'
Amount of Each Disbursement this Period

[REDACTED] 245.46

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1918'
Amount of Each Disbursement this Period

[REDACTED] 470.58

Memo Item

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

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

[REDACTED] 753.81

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 30 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1921f
Amount of Each Disbursement this Period: 1180.26

Memo Item

B. TOWNSEND GROUP

Full Name (Last, First, Middle Initial)
Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314-1837

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 04 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1770e
Amount of Each Disbursement this Period: 7296.03

Memo Item

C. TOWNSEND GROUP

Full Name (Last, First, Middle Initial)
Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314-1837

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 01 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I1825
Amount of Each Disbursement this Period: 16814.44

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 25290.73

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TOWNSEND GROUP

Mailing Address 1006 PENDLETON STREET

City
ALEXANDRIA

State
VA

Zip Code
22314-1837

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	1			2	0	1	7		

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.I1872'
Amount of Each Disbursement this Period

[Redacted] 14675.90

Memo Item

Full Name (Last, First, Middle Initial)

B. VILLAGE GRAPHICS

Mailing Address PO BOX 505

City
HARTLAND

State
WI

Zip Code
53029-0505

Purpose of Disbursement
JFC PRINTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	6			2	0	1	7		

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.I18617
Amount of Each Disbursement this Period

[Redacted] 724.88

Memo Item

Full Name (Last, First, Middle Initial)

C. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC RENT AND PHONES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	4			2	0	1	7		

FEC Identification Number

C C00002931

Transaction ID : SB21B.I1858
Amount of Each Disbursement this Period

[Redacted] 21940.93

Memo Item

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

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

[Redacted] 37341.71

[Redacted] 2260374.82

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. RYAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017
Mailing Address PO BOX 1488		FEC Identification Number C00330894 Transaction ID : SB22.I18218 Amount of Each Disbursement this Period 926681.72
City JANESVILLE	State WI	Zip Code 53547
Purpose of Disbursement TRANSFER OF NET JFC FUNDS		Category/ Type
Candidate Name RYAN, PAUL, D, ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI	District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. RYAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017
Mailing Address PO BOX 1488		FEC Identification Number C00330894 Transaction ID : SB22.I18619 Amount of Each Disbursement this Period 1135285.48
City JANESVILLE	State WI	Zip Code 53547
Purpose of Disbursement TRANSFER OF NET JFC FUNDS		Category/ Type
Candidate Name RYAN, PAUL, D, ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI	District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. RYAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address PO BOX 1488		FEC Identification Number C00330894 Transaction ID : SB22.I19211 Amount of Each Disbursement this Period 997723.17
City JANESVILLE	State WI	Zip Code 53547
Purpose of Disbursement TRANSFER OF NET JFC FUNDS		Category/ Type
Candidate Name RYAN, PAUL, D, ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI	District: 01	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3059690.37
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. TARGETED VICTORY		Date of Disbursement MM / DD / YYYY 06 / 08 / 2017	
Mailing Address 1100 WILSON BLVD FL 10			
City ARLINGTON	State VA	Zip Code 22209	
Purpose of Disbursement JFC CC TRANSACTION FEES		Category/Type <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
		FEC Identification Number C Transaction ID : SB22.I18759 Amount of Each Disbursement this Period 73.23 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. NRCC		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017	
Mailing Address 320 FIRST STREET SE			
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement TRANSFER OF NET JFC FUNDS		Category/Type <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
		FEC Identification Number C C00002931 Transaction ID : SB22.I18219 Amount of Each Disbursement this Period 1464878.93 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. NRCC		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017	
Mailing Address 320 FIRST STREET SE			
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement TRANSFER OF NET JFC FUNDS (BUILDING FUND)		Category/Type <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
		FEC Identification Number C C00002931 Transaction ID : SB22.I18220 Amount of Each Disbursement this Period 1119130.72 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶	2584082.88
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NRCC

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS (LEGAL FUND)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 27 / 2017

FEC Identification Number: C00002931
Transaction ID : SB22.I18221
Amount of Each Disbursement this Period: 161503.37

Memo Item

B. NRCC

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00002931
Transaction ID : SB22.I18621
Amount of Each Disbursement this Period: 1076123.87

Memo Item

C. NRCC

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS (BUILDING FUND)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 30 / 2017

FEC Identification Number: C00002931
Transaction ID : SB22.I18622
Amount of Each Disbursement this Period: 202360.69

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1439987.93

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2017

FEC Identification Number

C C00002931

Transaction ID : SB22.I19212

Amount of Each Disbursement this Period

982984.06

Memo Item

Full Name (Last, First, Middle Initial)

B. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS (BUILDING FUND)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2017

FEC Identification Number

C C00002931

Transaction ID : SB22.I19213

Amount of Each Disbursement this Period

440502.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS (LEGAL FUND)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2017

FEC Identification Number

C C00002931

Transaction ID : SB22.I19214

Amount of Each Disbursement this Period

137726.39

Memo Item

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

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

1561212.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. PROSPERITY ACTION, INC.

Mailing Address 320 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	7

FEC Identification Number

C C00377689

Transaction ID : SB22.I18217

Amount of Each Disbursement this Period

298405.93

Memo Item

Full Name (Last, First, Middle Initial)

B. PROSPERITY ACTION, INC.

Mailing Address 320 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	7

FEC Identification Number

C C00377689

Transaction ID : SB22.I18620

Amount of Each Disbursement this Period

298314.03

Memo Item

Full Name (Last, First, Middle Initial)

C. PROSPERITY ACTION, INC.

Mailing Address 320 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	7

FEC Identification Number

C C00377689

Transaction ID : SB22.I19210

Amount of Each Disbursement this Period

442364.13

Memo Item

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

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

1039084.09

9684057.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. CHANDI, NACHHATTAR, S, ,		Date of Disbursement MM / DD / YYYY 05 / 04 / 2017	
Mailing Address 42270 SPECTRUM ST		FEC Identification Number C [REDACTED] Transaction ID : SB28A.I1833' Amount of Each Disbursement this Period [REDACTED] 33900.00	
City INDIO	State CA	Zip Code 92203	Category/ Type [REDACTED]
Purpose of Disbursement REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. RAFANIELLO, PATRICK, , ,		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017	
Mailing Address 325 7TH ST NW STE 400		FEC Identification Number C [REDACTED] Transaction ID : SB28A.I1919f Amount of Each Disbursement this Period [REDACTED] 2500.00	
City WASHINGTON	State DC	Zip Code 20004	Category/ Type [REDACTED]
Purpose of Disbursement REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. RUSSELL, THOMAS, , ,		Date of Disbursement MM / DD / YYYY 06 / 27 / 2017	
Mailing Address 7134 S YALE AVE		FEC Identification Number C [REDACTED] Transaction ID : SB28A.I1917 Amount of Each Disbursement this Period [REDACTED] 3000.00	
City TULSA	State OK	Zip Code 74136	Category/ Type [REDACTED]
Purpose of Disbursement REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 39400.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. ACCESS THE USA LLC		Date of Disbursement MM / DD / YYYY 05 / 01 / 2017	
Mailing Address 673 WOODLAND SQ LP SE STE 320		FEC Identification Number C [REDACTED] Transaction ID : SB28A.I1825I Amount of Each Disbursement this Period 25000.00	
City LACEY	State WA	Zip Code 98503	Category/ Type
Purpose of Disbursement REFUND		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. AUTOMOTIVE COLOR AND SUPPLY CORP		Date of Disbursement MM / DD / YYYY 04 / 24 / 2017	
Mailing Address 1902 S CALHOUN ST		FEC Identification Number C [REDACTED] Transaction ID : SB28A.I1821I Amount of Each Disbursement this Period 2000.00	
City FORT WAYNE	State IN	Zip Code 46802	Category/ Type
Purpose of Disbursement REFUND		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. COURSON FAMILY OIL & GAS PARTNERSHIP		Date of Disbursement MM / DD / YYYY 06 / 16 / 2017	
Mailing Address PO BOX 809		FEC Identification Number C [REDACTED] Transaction ID : SB28A.I1913I Amount of Each Disbursement this Period - 2500.00	
City PERRYTON	State TX	Zip Code 79070	Category/ Type
Purpose of Disbursement VOID OF PREVIOUS - REFUND NEVER CASHED (DISGORGED ON LINE 2a)		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

24500.00

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FASKEN MANAGEMENT

Full Name (Last, First, Middle Initial)

Mailing Address 6101 HOLIDAY HILL RD

City MIDLAND State TX Zip Code 79707

Purpose of Disbursement REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1905I

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. MERCEDES-BENZ OF FORT WAYNE

Full Name (Last, First, Middle Initial)

Mailing Address 7227 W JEFFERSON BLVD

City FORT WAYNE State IN Zip Code 46804

Purpose of Disbursement REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I19057

Amount of Each Disbursement this Period: 10000.00

Memo Item

C. PRAIRIE PINES LTD

Full Name (Last, First, Middle Initial)

Mailing Address 1922 124TH ST

City LUBBOCK State TX Zip Code 79423

Purpose of Disbursement VOID OF PREVIOUS - REFUND NEVER CASHED (DISGORGED ON LINE 29)

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1913

Amount of Each Disbursement this Period: - 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 14750.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. PRATT AND ASSOCIATES

Mailing Address 302 LAFAYETTE DR

City
VICKSBURG

State
MS

Zip Code
39180

Purpose of Disbursement
VOID OF PREVIOUS - REFUND NEVER CASHED (DISGORGED ON LINE
201)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1913I

Amount of Each Disbursement this Period

[REDACTED] - 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RGLBLAIR LLC

Mailing Address 7764 S ELM CT

City
CENTENNIAL

State
CO

Zip Code
80122

Purpose of Disbursement
VOID OF PREVIOUS - REFUND NEVER CASHED (DISGORGED ON LINE
201)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1913I

Amount of Each Disbursement this Period

[REDACTED] - 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTH TEXAS MONEY MANAGEMENT LTD

Mailing Address 700 N ST MARY'S ST STE 100

City
SAN ANTONIO

State
TX

Zip Code
78205

Purpose of Disbursement
REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1913I

Amount of Each Disbursement this Period

[REDACTED] 2700.00

Memo Item

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

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

[REDACTED] 1700.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SUGAR CREEK PACKING CO

Mailing Address 495 OLD CHILLICOTHE RD SE

City WASHINGTON COURT H

State OH

Zip Code 43160

Purpose of Disbursement REFUND

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2017

FEC Identification Number

C
Transaction ID : SB28A.I1874
Amount of Each Disbursement this Period
25000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON

State VA

Zip Code 22209

Purpose of Disbursement SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2017

FEC Identification Number

C
Transaction ID : SB28A.I1798
Amount of Each Disbursement this Period
17531.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ADOLPH, GREG, , ,

Mailing Address 14086 PAUMA VISTA DR

City VALLEY CENTER

State CA

Zip Code 92082

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2017

FEC Identification Number

C
Transaction ID : SB28A.I1819
Amount of Each Disbursement this Period
250.00

Memo Item

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

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

42531.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. BERGLOFF, ODETTE, , ,

Mailing Address 640 SAND HILL RD

City
HERSHEY

State
PA

Zip Code
17033

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB28A.I18001

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BERGLOFF, ODETTE, , ,

Mailing Address 640 SAND HILL RD

City
HERSHEY

State
PA

Zip Code
17033

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB28A.I18001

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BERGLOFF, ODETTE, , ,

Mailing Address 640 SAND HILL RD

City
HERSHEY

State
PA

Zip Code
17033

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB28A.I18001

Amount of Each Disbursement this Period

25.00

Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. BERGLOFF, ODETTE, , ,

Mailing Address 640 SAND HILL RD

City
HERSHEY

State
PA

Zip Code
17033

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I1800:
Amount of Each Disbursement this Period
[] 25.00 []

Memo Item

Full Name (Last, First, Middle Initial)

B. BERGLOFF, ODETTE, , ,

Mailing Address 640 SAND HILL RD

City
HERSHEY

State
PA

Zip Code
17033

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I1800:
Amount of Each Disbursement this Period
[] 25.00 []

Memo Item

Full Name (Last, First, Middle Initial)

C. BERGLOFF, ODETTE, , ,

Mailing Address 640 SAND HILL RD

City
HERSHEY

State
PA

Zip Code
17033

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I1800:
Amount of Each Disbursement this Period
[] 25.00 []

Memo Item

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

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

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						0	.	0	0

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERGLOFF, ODETTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 640 SAND HILL RD

City HERSHEY State PA Zip Code 17033

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1800I

Amount of Each Disbursement this Period: 25.00

Memo Item

B. BERGLOFF, ODETTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 640 SAND HILL RD

City HERSHEY State PA Zip Code 17033

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1800I

Amount of Each Disbursement this Period: 25.00

Memo Item

C. BERGLOFF, ODETTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 640 SAND HILL RD

City HERSHEY State PA Zip Code 17033

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1800I

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. BRANSFIELD, VINCENT, , ,		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017	
Mailing Address 432 SEVILLE STREET		FEC Identification Number C [] Transaction ID : SB28A.I18111	
City PHILADELPHIA	State PA	Zip Code 19128	Amount of Each Disbursement this Period [] 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type []	Memo Item <input checked="" type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. BRANSFIELD, VINCENT, , ,		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017	
Mailing Address 432 SEVILLE STREET		FEC Identification Number C [] Transaction ID : SB28A.I18111	
City PHILADELPHIA	State PA	Zip Code 19128	Amount of Each Disbursement this Period [] 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type []	Memo Item <input checked="" type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. BRANSFIELD, VINCENT, , ,		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017	
Mailing Address 432 SEVILLE STREET		FEC Identification Number C [] Transaction ID : SB28A.I18111	
City PHILADELPHIA	State PA	Zip Code 19128	Amount of Each Disbursement this Period [] 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type []	Memo Item <input checked="" type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANSFIELD, VINCENT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 432 SEVILLE STREET

City PHILADELPHIA State PA Zip Code 19128

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I18111

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BRANSFIELD, VINCENT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 432 SEVILLE STREET

City PHILADELPHIA State PA Zip Code 19128

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I18114

Amount of Each Disbursement this Period: 50.00

Memo Item

C. GIBB, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1 JOHN'S ISLAND DR.

City VERO BEACH State FL Zip Code 32963

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1812

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. GIBB, ROBERT, , ,

Mailing Address 1 JOHN'S ISLAND DR.

City
VERO BEACH

State
FL

Zip Code
32963

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I18124
Amount of Each Disbursement this Period
[] 250.00 []

Memo Item

Full Name (Last, First, Middle Initial)

B. GIBB, ROBERT, , ,

Mailing Address 1 JOHN'S ISLAND DR.

City
VERO BEACH

State
FL

Zip Code
32963

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I18124
Amount of Each Disbursement this Period
[] 250.00 []

Memo Item

Full Name (Last, First, Middle Initial)

C. GIBB, ROBERT, , ,

Mailing Address 1 JOHN'S ISLAND DR.

City
VERO BEACH

State
FL

Zip Code
32963

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I18124
Amount of Each Disbursement this Period
[] 250.00 []

Memo Item

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

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

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						0	.	0	0

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. GIBB, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017	
Mailing Address 1 JOHN'S ISLAND DR.		FEC Identification Number C [REDACTED] Transaction ID : SB28A.I18121 Amount of Each Disbursement this Period [REDACTED] 250.00	
City VERO BEACH	State FL	Zip Code 32963	Category/ Type [REDACTED]
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. GIBB, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017	
Mailing Address 1 JOHN'S ISLAND DR.		FEC Identification Number C [REDACTED] Transaction ID : SB28A.I18127 Amount of Each Disbursement this Period [REDACTED] 250.00	
City VERO BEACH	State FL	Zip Code 32963	Category/ Type [REDACTED]
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. GREULICH, JOHN, , ,		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017	
Mailing Address 1327 SAVANNAH LN.		FEC Identification Number C [REDACTED] Transaction ID : SB28A.I1801 Amount of Each Disbursement this Period [REDACTED] 50.00	
City CARLSBAD	State CA	Zip Code 92011	Category/ Type [REDACTED]
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREULICH, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1327 SAVANNAH LN.

City CARLSBAD State CA Zip Code 92011

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1801!

Amount of Each Disbursement this Period: 50.00

Memo Item

B. GREULICH, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1327 SAVANNAH LN.

City CARLSBAD State CA Zip Code 92011

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1801!

Amount of Each Disbursement this Period: 50.00

Memo Item

C. GREULICH, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1327 SAVANNAH LN.

City CARLSBAD State CA Zip Code 92011

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1801!

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. GREULICH, JOHN, , ,

Mailing Address 1327 SAVANNAH LN.

City
CARLSBAD

State
CA

Zip Code
92011

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1801

Amount of Each Disbursement this Period

[REDACTED] 50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. GU, WEIQUN, , ,

Mailing Address 110-15 71ST RD
5F

City
FOREST HILLS

State
NY

Zip Code
11375

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I18101

Amount of Each Disbursement this Period

[REDACTED] 600.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MILLIGAN, DAVID, , ,

Mailing Address 775 S GREEN BAY RD

City
LAKE FOREST

State
IL

Zip Code
60045

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1808

Amount of Each Disbursement this Period

[REDACTED] 2500.00

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLIGAN, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 775 S GREEN BAY RD

City LAKE FOREST State IL Zip Code 60045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1808

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. MILLIGAN, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 775 S GREEN BAY RD

City LAKE FOREST State IL Zip Code 60045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1808

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. MILLIGAN, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 775 S GREEN BAY RD

City LAKE FOREST State IL Zip Code 60045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1808

Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERMAN, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3815 N BROOKFIELD RD

City BROOKFIELD State WI Zip Code 53045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1807

Amount of Each Disbursement this Period: 25.00

Memo Item

B. PETERMAN, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3815 N BROOKFIELD RD

City BROOKFIELD State WI Zip Code 53045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1807

Amount of Each Disbursement this Period: 25.00

Memo Item

C. PETERMAN, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3815 N BROOKFIELD RD

City BROOKFIELD State WI Zip Code 53045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1807

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. PETERMAN, JOHN, , ,

Mailing Address 3815 N BROOKFIELD RD

City
BROOKFIELD

State
WI

Zip Code
53045

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I18071

Amount of Each Disbursement this Period

[REDACTED] 25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PETERMAN, JOHN, , ,

Mailing Address 3815 N BROOKFIELD RD

City
BROOKFIELD

State
WI

Zip Code
53045

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I18077

Amount of Each Disbursement this Period

[REDACTED] 25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PETERMAN, JOHN, , ,

Mailing Address 3815 N BROOKFIELD RD

City
BROOKFIELD

State
WI

Zip Code
53045

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1807

Amount of Each Disbursement this Period

[REDACTED] 25.00

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERMAN, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3815 N BROOKFIELD RD

City BROOKFIELD State WI Zip Code 53045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C
Transaction ID : SB28A.I1807!

Amount of Each Disbursement this Period: 25.00

Memo Item

B. PETERMAN, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3815 N BROOKFIELD RD

City BROOKFIELD State WI Zip Code 53045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C
Transaction ID : SB28A.I1808c

Amount of Each Disbursement this Period: 25.00

Memo Item

C. PETERMAN, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3815 N BROOKFIELD RD

City BROOKFIELD State WI Zip Code 53045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 18 / 2017

FEC Identification Number: C
Transaction ID : SB28A.I1808

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. PETERMAN, JOHN, , ,

Mailing Address 3815 N BROOKFIELD RD

City
BROOKFIELD

State
WI

Zip Code
53045

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]
Transaction ID : SB28A.I1808
Amount of Each Disbursement this Period
[REDACTED] 25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PETERMAN, JOHN, , ,

Mailing Address 3815 N BROOKFIELD RD

City
BROOKFIELD

State
WI

Zip Code
53045

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]
Transaction ID : SB28A.I1808
Amount of Each Disbursement this Period
[REDACTED] 25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SHAPIRO, JEFFREY, , ,

Mailing Address 1133 TOWLSTON RD

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]
Transaction ID : SB28A.I1819
Amount of Each Disbursement this Period
[REDACTED] 247.00

Memo Item

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

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

[REDACTED]	0.00
------------	------

[REDACTED]	
------------	--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. WOLF, KAREN, , ,		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017	
Mailing Address 2139 QUAIL DRIVE		FEC Identification Number C [] Transaction ID : SB28A.I1799! Amount of Each Disbursement this Period [] 45.00	
City LANCASTER	State PA	Zip Code 17601	Category/ Type []
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. WOLF, KAREN, , ,		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017	
Mailing Address 2139 QUAIL DRIVE		FEC Identification Number C [] Transaction ID : SB28A.I1799! Amount of Each Disbursement this Period [] 45.00	
City LANCASTER	State PA	Zip Code 17601	Category/ Type []
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. WOLF, KAREN, , ,		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017	
Mailing Address 2139 QUAIL DRIVE		FEC Identification Number C [] Transaction ID : SB28A.I1799! Amount of Each Disbursement this Period [] 45.00	
City LANCASTER	State PA	Zip Code 17601	Category/ Type []
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. WOLF, KAREN, , ,

Mailing Address 2139 QUAIL DRIVE

City
LANCASTER

State
PA

Zip Code
17601

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	7	9	9

FEC Identification Number

C [REDACTED]
Transaction ID : SB28A.I1799i
Amount of Each Disbursement this Period
[REDACTED] 45.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WOLF, KAREN, , ,

Mailing Address 2139 QUAIL DRIVE

City
LANCASTER

State
PA

Zip Code
17601

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	7	9	9

FEC Identification Number

C [REDACTED]
Transaction ID : SB28A.I1799i
Amount of Each Disbursement this Period
[REDACTED] 45.00

Memo Item

Full Name (Last, First, Middle Initial)

C. YORIO, FRANCIS, , ,

Mailing Address 435 W. THORNAPPLE LANE

City
MEQUON

State
WI

Zip Code
53092

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	7	9	9

FEC Identification Number

C [REDACTED]
Transaction ID : SB28A.I1802
Amount of Each Disbursement this Period
[REDACTED] 50.00

Memo Item

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

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

[REDACTED]	0.00
------------	------

[REDACTED]	
------------	--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. YORIO, FRANCIS, , ,

Mailing Address 435 W. THORNAPPLE LANE

City
MEQUON

State
WI

Zip Code
53092

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I1802I
Amount of Each Disbursement this Period
[] 50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. YORIO, FRANCIS, , ,

Mailing Address 435 W. THORNAPPLE LANE

City
MEQUON

State
WI

Zip Code
53092

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I1802I
Amount of Each Disbursement this Period
[] 50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. YORIO, FRANCIS, , ,

Mailing Address 435 W. THORNAPPLE LANE

City
MEQUON

State
WI

Zip Code
53092

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I1802I
Amount of Each Disbursement this Period
[] 50.00

Memo Item

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

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

[]	0.00
-----	------

[]	[]
-----	-----

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. YORIO, FRANCIS, , ,

Date of Disbursement
MM / DD / YYYY
04 / 18 / 2017

Mailing Address 435 W. THORNAPPLE LANE

City MEQUON State WI Zip Code 53092

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB28A.I1802!
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. YORIO, FRANCIS, , ,

Date of Disbursement
MM / DD / YYYY
04 / 18 / 2017

Mailing Address 435 W. THORNAPPLE LANE

City MEQUON State WI Zip Code 53092

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB28A.I1803!
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. YORIO, FRANCIS, , ,

Date of Disbursement
MM / DD / YYYY
04 / 18 / 2017

Mailing Address 435 W. THORNAPPLE LANE

City MEQUON State WI Zip Code 53092

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB28A.I1803!
Amount of Each Disbursement this Period
50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. YORIO, FRANCIS, , ,

Date of Disbursement
MM / DD / YYYY
04 / 18 / 2017

Mailing Address 435 W. THORNAPPLE LANE

City MEQUON State WI Zip Code 53092

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB28A.I1803
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. YORIO, FRANCIS, , ,

Date of Disbursement
MM / DD / YYYY
04 / 18 / 2017

Mailing Address 435 W. THORNAPPLE LANE

City MEQUON State WI Zip Code 53092

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB28A.I1803
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. TARGETED VICTORY

Date of Disbursement
MM / DD / YYYY
04 / 18 / 2017

Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
JFC CC MERCHANT REFUND FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB28A.I1819
Amount of Each Disbursement this Period
300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWN, JAMIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17700 LONGDRAFT ROAD

City GAITHERSBURG State MD Zip Code 20878

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I18441

Amount of Each Disbursement this Period: 500.00

Memo Item

B. CROWN, JAMIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17700 LONGDRAFT ROAD

City GAITHERSBURG State MD Zip Code 20878

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I18441

Amount of Each Disbursement this Period: 500.00

Memo Item

C. CROWN, JAMIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17700 LONGDRAFT ROAD

City GAITHERSBURG State MD Zip Code 20878

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I18441

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CROWN, JAMIE, , ,

Mailing Address 17700 LONGDRAFT ROAD

City
GAITHERSBURG

State
MD

Zip Code
20878

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number

C
Transaction ID : SB28A.I1844:
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CROWN, JAMIE, , ,

Mailing Address 17700 LONGDRAFT ROAD

City
GAITHERSBURG

State
MD

Zip Code
20878

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number

C
Transaction ID : SB28A.I1844
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DRENNEN, BARBARA, , ,

Mailing Address 718 WALNUT ST

City
KENT

State
WA

Zip Code
98030

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number

C
Transaction ID : SB28A.I1845
Amount of Each Disbursement this Period
250.00

Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRENNEN, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 718 WALNUT ST

City KENT State WA Zip Code 98030

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1845

Amount of Each Disbursement this Period: 250.00

Memo Item

B. DRENNEN, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 718 WALNUT ST

City KENT State WA Zip Code 98030

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1845

Amount of Each Disbursement this Period: 250.00

Memo Item

C. DRENNEN, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 718 WALNUT ST

City KENT State WA Zip Code 98030

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1845

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DRENNEN, BARBARA, , ,

Mailing Address 718 WALNUT ST

City
KENT

State
WA

Zip Code
98030

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1845I
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. HEWETT, JOHN, , ,

Mailing Address 132 JORDAN'S JOURNEY

City
WILLIAMSBURG

State
VA

Zip Code
23185

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1850I
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. HEWETT, JOHN, , ,

Mailing Address 132 JORDAN'S JOURNEY

City
WILLIAMSBURG

State
VA

Zip Code
23185

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1850I
Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HEWETT, JOHN, , ,

Mailing Address 132 JORDAN'S JOURNEY

City
WILLIAMSBURG

State
VA

Zip Code
23185

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1850!

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HEWETT, JOHN, , ,

Mailing Address 132 JORDAN'S JOURNEY

City
WILLIAMSBURG

State
VA

Zip Code
23185

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1850!

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MUNTZ, JON, , ,

Mailing Address 16 BEACH RD

City
DUNKIRK

State
NY

Zip Code
14048

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1852

Amount of Each Disbursement this Period

[REDACTED] 100.00

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MUNTZ, JON, , ,

Mailing Address 16 BEACH RD

City
DUNKIRK

State
NY

Zip Code
14048

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB28A.I1853I

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MUNTZ, JON, , ,

Mailing Address 16 BEACH RD

City
DUNKIRK

State
NY

Zip Code
14048

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB28A.I1853I

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MUNTZ, JON, , ,

Mailing Address 16 BEACH RD

City
DUNKIRK

State
NY

Zip Code
14048

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	7

FEC Identification Number

C

Transaction ID : SB28A.I1853I

Amount of Each Disbursement this Period

100.00

Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PELLEGRINI, TERRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 550 W FLAMINGO DR UNIT 305

City VENICE State FL Zip Code 34285

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1852

Amount of Each Disbursement this Period: 250.00

Memo Item

B. RANEY, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5759 W. BERYL AVE N.A.

City GLENDALE State AZ Zip Code 85302

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1849

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. RANEY, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5759 W. BERYL AVE N.A.

City GLENDALE State AZ Zip Code 85302

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1849

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANEY, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5759 W. BERYL AVE
N.A.

City GLENDALE State AZ Zip Code 85302

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C
Transaction ID : SB28A.I1849
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. RANEY, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5759 W. BERYL AVE
N.A.

City GLENDALE State AZ Zip Code 85302

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C
Transaction ID : SB28A.I1849
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. RANEY, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5759 W. BERYL AVE
N.A.

City GLENDALE State AZ Zip Code 85302

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C
Transaction ID : SB28A.I1850
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STECKEL, ERIC, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 182 WINTHROP LN

City LAKE FOREST State IL Zip Code 60045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1848'

Amount of Each Disbursement this Period: 250.00

Memo Item

B. STECKEL, ERIC, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 182 WINTHROP LN

City LAKE FOREST State IL Zip Code 60045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I18482

Amount of Each Disbursement this Period: 250.00

Memo Item

C. STECKEL, ERIC, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 182 WINTHROP LN

City LAKE FOREST State IL Zip Code 60045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1848

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STECKEL, ERIC, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 182 WINTHROP LN

City LAKE FOREST State IL Zip Code 60045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1848

Amount of Each Disbursement this Period: 50.00

Memo Item

B. SULLIVAN, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 401 REVERE LANE

City MURRYSVILLE State PA Zip Code 15632

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I18517

Amount of Each Disbursement this Period: 100.00

Memo Item

C. SULLIVAN, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 401 REVERE LANE

City MURRYSVILLE State PA Zip Code 15632

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1851

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SULLIVAN, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 401 REVERE LANE

City MURRYSVILLE State PA Zip Code 15632

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1852I

Amount of Each Disbursement this Period: 100.00

Memo Item

B. SULLIVAN, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 401 REVERE LANE

City MURRYSVILLE State PA Zip Code 15632

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1852I

Amount of Each Disbursement this Period: 100.00

Memo Item

C. TYLER, SAMUEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12108 LOCUST LN

City LOUISVILLE State KY Zip Code 40223

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1852I

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TYLER, SAMUEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12108 LOCUST LN

City LOUISVILLE State KY Zip Code 40223

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1852!

Amount of Each Disbursement this Period: 100.00

Memo Item

B. TYLER, SAMUEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12108 LOCUST LN

City LOUISVILLE State KY Zip Code 40223

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1852!

Amount of Each Disbursement this Period: 100.00

Memo Item

C. TYLER, SAMUEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12108 LOCUST LN

City LOUISVILLE State KY Zip Code 40223

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1852!

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. VAASLLUZZO, JOSEPH, , ,

Mailing Address 2200 CHERRY PALM RD

City
BOCA RATON

State
FL

Zip Code
33432

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1853
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. VAASLLUZZO, JOSEPH, , ,

Mailing Address 2200 CHERRY PALM RD

City
BOCA RATON

State
FL

Zip Code
33432

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1853
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. VAASLLUZZO, JOSEPH, , ,

Mailing Address 2200 CHERRY PALM RD

City
BOCA RATON

State
FL

Zip Code
33432

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1853
Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. VAASLLUZZO, JOSEPH, , ,

Mailing Address 2200 CHERRY PALM RD

City
BOCA RATON

State
FL

Zip Code
33432

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1853;
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC MERCHANT REFUND FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I18567
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC REFUNDS (SEE MEMO ENTRIES BELOW)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1876
Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADSHAW, SAM C, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3605 CRESCENT AVE

City DALLAS State TX Zip Code 75205

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1889i

Amount of Each Disbursement this Period: 250.00

Memo Item

B. BRADSHAW, SAM C, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3605 CRESCENT AVE

City DALLAS State TX Zip Code 75205

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1889i

Amount of Each Disbursement this Period: 250.00

Memo Item

C. BRADSHAW, SAM C, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3605 CRESCENT AVE

City DALLAS State TX Zip Code 75205

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1890

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CONIGLIARO, JOSEPH, , ,

Mailing Address 20 FIELD STONE DRIVE
0

City
EASTON

State
CT

Zip Code
06612

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1896!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. HARRIS, CHARLES, , ,

Mailing Address 8700 PERSHING DR.,
NO. 5322

City
PLAYA DEL REY

State
CA

Zip Code
90293

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1892!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. HARRIS, CHARLES, , ,

Mailing Address 8700 PERSHING DR.,
NO. 5322

City
PLAYA DEL REY

State
CA

Zip Code
90293

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1892!
Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HARRIS, CHARLES, , ,

Mailing Address 8700 PERSHING DR.,
NO. 5322

City
PLAYA DEL REY

State
CA

Zip Code
90293

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C
Transaction ID : SB28A.I1892
Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JUNE, ROHLAND, , ,

Mailing Address 10846 DOWN YONDER LANE

City
WINDERMERE

State
FL

Zip Code
34786

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C
Transaction ID : SB28A.I18907
Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KEMPTON, CRAIG, , ,

Mailing Address 2229 ROSE HILL CT

City
NAPERVILLE

State
IL

Zip Code
60565

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C
Transaction ID : SB28A.I1877
Amount of Each Disbursement this Period

75.00

Memo Item

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

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

0	0	0
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0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEMPTON, CRAIG, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2229 ROSE HILL CT

City NAPERVILLE State IL Zip Code 60565

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1878I

Amount of Each Disbursement this Period: 75.00

Memo Item

B. MAHER, CHRIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1787 CEDAR HILL RD

City CLEAR BROOK State VA Zip Code 22624

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1883I

Amount of Each Disbursement this Period: 100.00

Memo Item

C. MAHER, CHRIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1787 CEDAR HILL RD

City CLEAR BROOK State VA Zip Code 22624

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1883I

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. MAHER, CHRIS, , ,		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017	
Mailing Address 1787 CEDAR HILL RD		FEC Identification Number C [] Transaction ID : SB28A.I1883 Amount of Each Disbursement this Period [] 100.00	
City CLEAR BROOK	State VA	Zip Code 22624	Category/ Type []
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. O'NEIL, GORDON, , ,		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017	
Mailing Address 2457 LEXINGTON CIR. 0		FEC Identification Number C [] Transaction ID : SB28A.I18964 Amount of Each Disbursement this Period [] 250.00	
City SALT LAKE CITY	State UT	Zip Code 84124	Category/ Type []
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. PALOMBO, MARKHAM, , ,		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017	
Mailing Address 10054 STRATMORE CIRCLE		FEC Identification Number C [] Transaction ID : SB28A.I1891 Amount of Each Disbursement this Period [] 250.00	
City SHREVEPORT	State LA	Zip Code 71115	Category/ Type []
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REECE, LAWRENCE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1720 BUCKTHORN CT
0

City MINDEN State NV Zip Code 89423

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1896I

Amount of Each Disbursement this Period: 500.00

Memo Item

B. RILEY, CINDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 405 N I 27

City LUBBOCK State TX Zip Code 79403

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1881I

Amount of Each Disbursement this Period: 100.00

Memo Item

C. RILEY, CINDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 405 N I 27

City LUBBOCK State TX Zip Code 79403

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1881I

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RILEY, CINDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 405 N I 27

City LUBBOCK State TX Zip Code 79403

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1881

Amount of Each Disbursement this Period: 100.00

Memo Item

B. SIE, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9 TOPEKA AVE

City SAN FRANCISCO State CA Zip Code 94124

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1878

Amount of Each Disbursement this Period: 100.00

Memo Item

C. SIE, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9 TOPEKA AVE

City SAN FRANCISCO State CA Zip Code 94124

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1878

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SIE, THOMAS, , ,

Mailing Address 9 TOPEKA AVE

City
SAN FRANCISCO

State
CA

Zip Code
94124

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1879I

Amount of Each Disbursement this Period

[REDACTED]	100.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

B. TAYLOR, CHRISTINE, , ,

Mailing Address 12220 PEBBLEPOINTE PASS
0

City
CARMEL

State
IN

Zip Code
46033

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1896I

Amount of Each Disbursement this Period

[REDACTED]	600.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

C. TAYLOR, CHRISTINE, , ,

Mailing Address 12220 PEBBLEPOINTE PASS
0

City
CARMEL

State
IN

Zip Code
46033

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1896I

Amount of Each Disbursement this Period

[REDACTED]	600.00
------------	--------

Memo Item

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

[REDACTED]	0.00
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TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. WILLIAMS, DON, , ,

Mailing Address P O BOX 80892

City
CONYERS

State
GA

Zip Code
30013

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I18811

Amount of Each Disbursement this Period

[REDACTED]	250.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

B. WILLIAMS, DON, , ,

Mailing Address P O BOX 80892

City
CONYERS

State
GA

Zip Code
30013

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I18817

Amount of Each Disbursement this Period

[REDACTED]	250.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC MERCHANT REFUND FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1905

Amount of Each Disbursement this Period

[REDACTED]	675.00
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Memo Item

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

[REDACTED]	0.00
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TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	
------------	--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC REFUNDS (SEE MEMO ENTRIES BELOW)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I1876;
Amount of Each Disbursement this Period
[] 4224.00 []

Memo Item

Full Name (Last, First, Middle Initial)

B. BUTZ, SHARON, , ,

Mailing Address 3444 DORAL DRIVE

City
WATERLOO

State
IA

Zip Code
50701

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I1897;
Amount of Each Disbursement this Period
[] 50.00 []

Memo Item

Full Name (Last, First, Middle Initial)

C. BUTZ, SHARON, , ,

Mailing Address 3444 DORAL DRIVE

City
WATERLOO

State
IA

Zip Code
50701

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB28A.I1897
Amount of Each Disbursement this Period
[] 50.00 []

Memo Item

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

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

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						4	2	2	4

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTZ, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3444 DORAL DRIVE

City WATERLOO State IA Zip Code 50701

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1898I

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BUTZ, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3444 DORAL DRIVE

City WATERLOO State IA Zip Code 50701

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1898I

Amount of Each Disbursement this Period: 50.00

Memo Item

C. BUTZ, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3444 DORAL DRIVE

City WATERLOO State IA Zip Code 50701

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1898I

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTZ, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3444 DORAL DRIVE

City WATERLOO State IA Zip Code 50701

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1898

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BUTZ, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3444 DORAL DRIVE

City WATERLOO State IA Zip Code 50701

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I18984

Amount of Each Disbursement this Period: 50.00

Memo Item

C. FLOWER, LUDLOW, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 157 BLACKBERRY HILL RD.

City ORFORD State NH Zip Code 03777

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1900

Amount of Each Disbursement this Period: 131.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. **FLOWER, LUDLOW, , ,**
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 BLACKBERRY HILL RD.
 City ORFORD State NH Zip Code 03777
 Purpose of Disbursement CONTRIBUTION REFUND
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:
 Date of Disbursement 06 / 13 / 2017
 FEC Identification Number C
 Transaction ID : SB28A.I1900
 Amount of Each Disbursement this Period 131.00
 Memo Item

B. **FLOWER, LUDLOW, , ,**
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 BLACKBERRY HILL RD.
 City ORFORD State NH Zip Code 03777
 Purpose of Disbursement CONTRIBUTION REFUND
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:
 Date of Disbursement 06 / 13 / 2017
 FEC Identification Number C
 Transaction ID : SB28A.I1900
 Amount of Each Disbursement this Period 131.00
 Memo Item

C. **FLOWER, LUDLOW, , ,**
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 BLACKBERRY HILL RD.
 City ORFORD State NH Zip Code 03777
 Purpose of Disbursement CONTRIBUTION REFUND
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:
 Date of Disbursement 06 / 13 / 2017
 FEC Identification Number C
 Transaction ID : SB28A.I1900
 Amount of Each Disbursement this Period 131.00
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOWER, LUDLOW, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 157 BLACKBERRY HILL RD.

City ORFORD State NH Zip Code 03777

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1900

Amount of Each Disbursement this Period: 131.00

Memo Item

B. FLOWER, LUDLOW, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 157 BLACKBERRY HILL RD.

City ORFORD State NH Zip Code 03777

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1900

Amount of Each Disbursement this Period: 131.00

Memo Item

C. FLOWER, LUDLOW, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 157 BLACKBERRY HILL RD.

City ORFORD State NH Zip Code 03777

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1900

Amount of Each Disbursement this Period: 131.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. FLOWER, LUDLOW, , ,		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017	
Mailing Address 157 BLACKBERRY HILL RD.			
City ORFORD	State NH	Zip Code 03777	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	FEC Identification Number C Transaction ID : SB28A.I1900 Amount of Each Disbursement this Period 131.00 <input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. FULLER, WALTER, , ,		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017	
Mailing Address 76 S WAYEHUTTA ROAD			
City CULLOWHEE	State NC	Zip Code 28723	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	FEC Identification Number C Transaction ID : SB28A.I1898 Amount of Each Disbursement this Period 50.00 <input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. FULLER, WALTER, , ,		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017	
Mailing Address 76 S WAYEHUTTA ROAD			
City CULLOWHEE	State NC	Zip Code 28723	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	FEC Identification Number C Transaction ID : SB28A.I1898 Amount of Each Disbursement this Period 50.00 <input checked="" type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FULLER, WALTER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 76 S WAYEHUTTA ROAD

City CULLOWHEE State NC Zip Code 28723

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1898

Amount of Each Disbursement this Period: 50.00

Memo Item

B. FULLER, WALTER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 76 S WAYEHUTTA ROAD

City CULLOWHEE State NC Zip Code 28723

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1898

Amount of Each Disbursement this Period: 50.00

Memo Item

C. FULLER, WALTER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 76 S WAYEHUTTA ROAD

City CULLOWHEE State NC Zip Code 28723

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1898

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. FULLER, WALTER, , ,		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017	
Mailing Address 76 S WAYEHUTTA ROAD		FEC Identification Number C [] Transaction ID : SB28A.I1899I Amount of Each Disbursement this Period [] 50.00	
City CULLOWHEE	State NC	Zip Code 28723	Category/ Type []
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ROSE, CALDWELL, , ,		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017	
Mailing Address 4201 CONGRESS ST SUITE 170		FEC Identification Number C [] Transaction ID : SB28A.I1897I Amount of Each Disbursement this Period [] 50.00	
City CHARLOTTE	State NC	Zip Code 28209	Category/ Type []
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ROSE, CALDWELL, , ,		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017	
Mailing Address 4201 CONGRESS ST SUITE 170		FEC Identification Number C [] Transaction ID : SB28A.I1897I Amount of Each Disbursement this Period [] 50.00	
City CHARLOTTE	State NC	Zip Code 28209	Category/ Type []
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSE, CALDWELL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4201 CONGRESS ST SUITE 170

City CHARLOTTE State NC Zip Code 28209

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1897

Amount of Each Disbursement this Period: 50.00

Memo Item

B. ROSE, CALDWELL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4201 CONGRESS ST SUITE 170

City CHARLOTTE State NC Zip Code 28209

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1897

Amount of Each Disbursement this Period: 50.00

Memo Item

C. ROSE, CALDWELL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4201 CONGRESS ST SUITE 170

City CHARLOTTE State NC Zip Code 28209

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1897

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSE, CALDWELL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4201 CONGRESS ST SUITE 170

City CHARLOTTE State NC Zip Code 28209

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1897!

Amount of Each Disbursement this Period: 50.00

Memo Item

B. ROSE, CALDWELL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4201 CONGRESS ST SUITE 170

City CHARLOTTE State NC Zip Code 28209

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1897!

Amount of Each Disbursement this Period: 50.00

Memo Item

C. ROSE, CALDWELL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4201 CONGRESS ST SUITE 170

City CHARLOTTE State NC Zip Code 28209

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1897!

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAMSVICK, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 HARVEST LANE

City WINDSOR LOCKS State CT Zip Code 06096

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1899

Amount of Each Disbursement this Period: 100.00

Memo Item

B. SAMSVICK, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 HARVEST LANE

City WINDSOR LOCKS State CT Zip Code 06096

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1899

Amount of Each Disbursement this Period: 100.00

Memo Item

C. SAMSVICK, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 HARVEST LANE

City WINDSOR LOCKS State CT Zip Code 06096

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1899

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAMSVICK, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 HARVEST LANE

City WINDSOR LOCKS State CT Zip Code 06096

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1899f

Amount of Each Disbursement this Period: 100.00

Memo Item

B. SAMSVICK, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 HARVEST LANE

City WINDSOR LOCKS State CT Zip Code 06096

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1899f

Amount of Each Disbursement this Period: 100.00

Memo Item

C. SAMSVICK, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 HARVEST LANE

City WINDSOR LOCKS State CT Zip Code 06096

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1899f

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SAMSVICK, JOHN, , ,

Mailing Address 14 HARVEST LANE

City
WINDSOR LOCKS

State
CT

Zip Code
06096

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	1	7		

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1899!

Amount of Each Disbursement this Period

[REDACTED] 100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC MERCHANT REFUND FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	1	7		

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1905!

Amount of Each Disbursement this Period

[REDACTED] 285.00

Memo Item

Full Name (Last, First, Middle Initial)

C. THE LAW OFFICE OF BRENT DE LA PAZ

Mailing Address 16414 SAN PEDRO AVE STE 960

City
SAN ANTONIO

State
TX

Zip Code
78232

Purpose of Disbursement
REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	3			2	0	1	7		

FEC Identification Number

C [REDACTED]

Transaction ID : SB28A.I1797

Amount of Each Disbursement this Period

[REDACTED] 25000.00

Memo Item

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

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

[REDACTED] 25000.00

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THE ROTH FIRM

Full Name (Last, First, Middle Initial)

Mailing Address 950 E PACES FERRY RD STE 1650

City ATLANTA State GA Zip Code 30326

Purpose of Disbursement REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2017

FEC Identification Number: C

Transaction ID : SB28A.I1922'

Amount of Each Disbursement this Period: 1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	186611.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIENDS OF GREG HARTMANN

Full Name (Last, First, Middle Initial)
Mailing Address 3536 EDWARDS RD STE 201

City CINCINNATI State OH Zip Code 45208

Purpose of Disbursement
VOID OF PREVIOUS - REFUND NEVER CASHED (DISGORGED ON LINE 201)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
06 / 16 / 2017

FEC Identification Number
C

Transaction ID : SB28C.I1913

Amount of Each Disbursement this Period
- 2500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ - 2500.00

TOTAL This Period (last page this line number only)..... ▶ - 2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DEPARTMENT OF THE TREASURY

Mailing Address 1500 PENNSYLVANIA AVENUE

City
WASHINGTON

State
DC

Zip Code
20220-0001

Purpose of Disbursement
DISGORGEMENT OF CONTRIBUTIONS (SEE MEMO ENTRIES BELOW)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	7

FEC Identification Number

C

Transaction ID : SB29.I19127

Amount of Each Disbursement this Period

6250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. COURSON FAMILY OIL & GAS PARTNERSHIP

Mailing Address PO BOX 809

City
PERRYTON

State
TX

Zip Code
79070

Purpose of Disbursement
DISGORGED CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	7

FEC Identification Number

C

Transaction ID : SB29.I19130

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF GREG HARTMANN

Mailing Address 3536 EDWARDS RD STE 201

City
CINCINNATI

State
OH

Zip Code
45208

Purpose of Disbursement
DISGORGED CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	7

FEC Identification Number

C

Transaction ID : SB29.I19128

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

6250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. PRAIRIE PINES LTD

Mailing Address 1922 124TH ST

City
LUBBOCK

State
TX

Zip Code
79423

Purpose of Disbursement
DISGORGED CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	7

FEC Identification Number

C

Transaction ID : SB29.I19131

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PRATT AND ASSOCIATES

Mailing Address 302 LAFAYETTE DR

City
VICKSBURG

State
MS

Zip Code
39180

Purpose of Disbursement
DISGORGED CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	7

FEC Identification Number

C

Transaction ID : SB29.I19132

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RGBLAIR LLC

Mailing Address 7764 S ELM CT

City
CENTENNIAL

State
CO

Zip Code
80122

Purpose of Disbursement
DISGORGED CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	7

FEC Identification Number

C

Transaction ID : SB29.I19129

Amount of Each Disbursement this Period

500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

6250.00